



MISSOURI DEPARTMENT OF
**HEALTH &
SENIOR SERVICES**

**Fiscal Year 2025 Budget Request
with Governor's Recommendations**

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Director

Book 2 of 3

**DEPARTMENT OF HEALTH AND SENIOR SERVICES
FISCAL YEAR 2025 BUDGET- GOVERNOR’S RECOMMENDATIONS
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CORE DECISION ITEM

Health and Senior Services					Budget Unit 58620C				
Community and Public Health									
Core - Genetics and Newborn Health Services					HB Section 10.730				
1. CORE FINANCIAL SUMMARY									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	365,759	710,043	149,401	1,225,203	PS	365,759	710,043	149,401	1,225,203
EE	182,977	246,157	20,897	450,031	EE	182,977	246,157	20,897	450,031
PSD	838,324	557,127	1,649,750	3,045,201	PSD	838,324	557,127	1,649,750	3,045,201
TRF	0	0	0	0	TRF	0	0	0	0
Total	1,387,060	1,513,327	1,820,048	4,720,435	Total	1,387,060	1,513,327	1,820,048	4,720,435
FTE	4.82	12.42	1.96	19.20	FTE	4.82	12.42	1.96	19.20
Est. Fringe	208,710	451,169	85,119	744,998	Est. Fringe	208,710	451,169	85,119	744,998
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.				
Federal Funds: Department of Health and Senior Services Federal (0143). Other Funds: Health Initiatives (0275) and Missouri Public Health Services (0298).									
2. CORE DESCRIPTION									
The Genetics and Healthy Childhood (GHC) promotes and protects the health and safety of individuals and families based on their unique conditions, needs, and situations, utilizing multiple programs. The Department implements prevention and intervention strategies to optimize health and the environment from pre-pregnancy through adulthood.									
The Department accomplishes its mission in collaboration with families, health care providers, and other community, state, and national partners. Primary program activities and priorities include encouraging early entrance into prenatal care; providing education on healthy behaviors starting at preconception; helping families learn healthy parenting skills; administering the confidential, toll-free TEL-LINK Line that connects families with programs and services; providing follow-up and coordination of services to abnormal newborn blood spot screening tests and hearing loss exams for the purpose of early intervention and optimization of health outcomes; and providing case management, education, and awareness for Hepatitis B (HBV) to ensure infants born to HBV positive women receive timely and complete vaccination to prevent infection.									

CORE DECISION ITEM

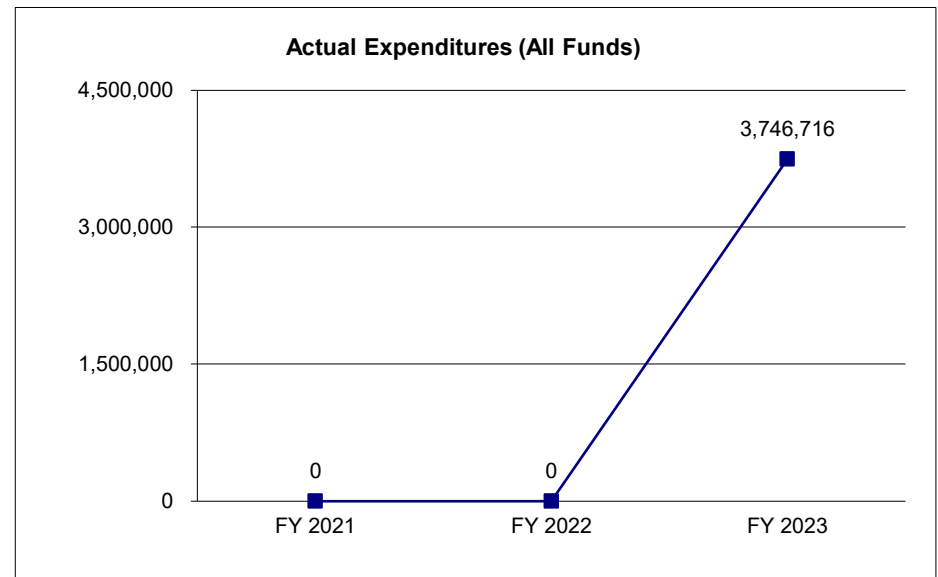
Health and Senior Services	Budget Unit 58620C
Community and Public Health	
Core - Genetics and Newborn Health Services	HB Section 10.730

3. PROGRAM LISTING (list programs included in this core funding)

Adult Genetics (Cystic Fibrosis, Hemophilia, and Sickle Cell Anemia)	Sexual Assault Forensic Examination and Child Abuse Resource
Genetic Services	and Education (SAFE-CARE)
Metabolic Formula Distribution	SIDS Autopsy Reimbursement
Newborn Health	TEL-LINK
Newborn Hearing Screening	
Newborn Blood Spot Screening	
Prenatal Hepatitis B Prevention and Case Management	
Prenatal Substance Use Prevention	

4. FINANCIAL HISTORY

	FY 2021 Actual	FY 2022 Actual	FY 2023 Actual	FY 2024 Current Yr.
Appropriation (All Funds)	0	0	4,385,509	4,720,434
Less Reverted (All Funds)	0	0	(36,767)	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	0	0	4,348,742	4,720,434
Actual Expenditures (All Funds)	0	0	3,746,716	N/A
Unexpended (All Funds)	0	0	602,026	N/A
Unexpended, by Fund:				
General Revenue	0	0	548	N/A
Federal	0	0	325,844	N/A
Other	0	0	275,934	N/A



Reverted includes the statutory three percent reserve amount (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.

CORE RECONCILIATION DETAIL

**DEPARTMENT OF HEALTH & SENIOR SERVICES
GENETICS AND NEWBORN HLTH SRVCS**

5. CORE RECONCILIATION DETAIL

				Budget Class	FTE	GR	Federal	Other	Total	Explanation
TAFP AFTER VETOES										
				EE	0.00	138,620	0	0	138,620	
				PD	0.00	97,762	0	1,649,750	1,747,512	
				Total	0.00	236,382	0	1,649,750	1,886,132	
DEPARTMENT CORE ADJUSTMENTS										
Core Reallocation	867	5028	PS	4.82	365,759	0	0	365,759	CORE reallocations for programmatic alignment.	
Core Reallocation	867	5037	PS	12.42	0	710,043	0	710,043	CORE reallocations for programmatic alignment.	
Core Reallocation	867	5043	PS	1.96	0	0	149,401	149,401	CORE reallocations for programmatic alignment.	
Core Reallocation	867	5039	EE	0.00	0	3,429	0	3,429	CORE reallocations for programmatic alignment.	
Core Reallocation	867	5808	EE	0.00	0	0	10,585	10,585	CORE reallocations for programmatic alignment.	
Core Reallocation	867	5044	EE	0.00	0	0	10,312	10,312	CORE reallocations for programmatic alignment.	
Core Reallocation	867	5030	EE	0.00	44,357	0	0	44,357	CORE reallocations for programmatic alignment.	
Core Reallocation	867	5038	EE	0.00	0	242,728	0	242,728	CORE reallocations for programmatic alignment.	
Core Reallocation	867	5038	PD	0.00	0	21,525	0	21,525	CORE reallocations for programmatic alignment.	
Core Reallocation	867	5030	PD	0.00	490,562	0	0	490,562	CORE reallocations for programmatic alignment.	

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES GENETICS AND NEWBORN HLTH SRVCS

5. CORE RECONCILIATION DETAIL

			Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS									
Core Reallocation	867	5707	PD	0.00	250,000	0	0	250,000	CORE reallocations for programmatic alignment.
Core Reallocation	867	5039	PD	0.00	0	535,602	0	535,602	CORE reallocations for programmatic alignment.
NET DEPARTMENT CHANGES				19.20	1,150,678	1,513,327	170,298	2,834,303	
DEPARTMENT CORE REQUEST									
			PS	19.20	365,759	710,043	149,401	1,225,203	
			EE	0.00	182,977	246,157	20,897	450,031	
			PD	0.00	838,324	557,127	1,649,750	3,045,201	
Total				19.20	1,387,060	1,513,327	1,820,048	4,720,435	
GOVERNOR'S RECOMMENDED CORE									
			PS	19.20	365,759	710,043	149,401	1,225,203	
			EE	0.00	182,977	246,157	20,897	450,031	
			PD	0.00	838,324	557,127	1,649,750	3,045,201	
Total				19.20	1,387,060	1,513,327	1,820,048	4,720,435	

DECISION ITEM SUMMARY

Budget Unit								
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
GENETICS AND NEWBRN HLTH SRVCS								
CORE								
PERSONAL SERVICES								
GENERAL REVENUE	0	0.00	0	0.00	365,759	4.82	365,759	4.82
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	710,043	12.42	710,043	12.42
MO PUBLIC HEALTH SERVICES	0	0.00	0	0.00	149,401	1.96	149,401	1.96
TOTAL - PS	0	0.00	0	0.00	1,225,203	19.20	1,225,203	19.20
EXPENSE & EQUIPMENT								
GENERAL REVENUE	103,205	0.00	138,620	0.00	182,977	0.00	182,977	0.00
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	246,157	0.00	246,157	0.00
HEALTH INITIATIVES	0	0.00	0	0.00	10,585	0.00	10,585	0.00
MO PUBLIC HEALTH SERVICES	0	0.00	0	0.00	10,312	0.00	10,312	0.00
TOTAL - EE	103,205	0.00	138,620	0.00	450,031	0.00	450,031	0.00
PROGRAM-SPECIFIC								
GENERAL REVENUE	120,032	0.00	97,762	0.00	838,324	0.00	838,324	0.00
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	557,127	0.00	557,127	0.00
MO PUBLIC HEALTH SERVICES	1,461,194	0.00	1,649,750	0.00	1,649,750	0.00	1,649,750	0.00
TOTAL - PD	1,581,226	0.00	1,747,512	0.00	3,045,201	0.00	3,045,201	0.00
TOTAL	1,684,431	0.00	1,886,132	0.00	4,720,435	19.20	4,720,435	19.20
Pay Plan - 0000012								
PERSONAL SERVICES								
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	34,752	0.00
MO PUBLIC HEALTH SERVICES	0	0.00	0	0.00	0	0.00	5,374	0.00
TOTAL - PS	0	0.00	0	0.00	0	0.00	40,126	0.00
TOTAL	0	0.00	0	0.00	0	0.00	40,126	0.00
RN/Surveyor Salary Adjustment - 1580027								
PERSONAL SERVICES								
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	10,191	0.00

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DECISION ITEM SUMMARY

Budget Unit								
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
GENETICS AND NEWBRN HLTH SRVCS								
RN/Surveyor Salary Adjustment - 1580027								
PERSONAL SERVICES								
MO PUBLIC HEALTH SERVICES	0	0.00	0	0.00	0	0.00	18,548	0.00
TOTAL - PS	0	0.00	0	0.00	0	0.00	28,739	0.00
TOTAL	0	0.00	0	0.00	0	0.00	28,739	0.00
GRAND TOTAL	\$1,684,431	0.00	\$1,886,132	0.00	\$4,720,435	19.20	\$4,789,300	19.20

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58620C	DEPARTMENT: Department of Health and Senior Services (DHSS)
BUDGET UNIT NAME: Genetics and Newborn Health Services	
HOUSE BILL SECTION: 10.730	DIVISION: Division of Community and Public Health (DCPH)

1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.

DEPARTMENT REQUEST

DHSS has worked to create and breakdown CORES within DCPH in order to align the budget structure with the division's operations. The Department requests fifty percent (50%) flexibility between House Bills 10.700, 10.705, 10.710, 10.715, 10.720, 10.725, 10.730, 10.735, 10.740, 10.745, 10.750, 10.755, 10.760, 10.765, 10.770, and 10.775 in order to ensure continuity of operations during the transition.

2. Estimate how much flexibility will be used for the budget year. How much flexibility was used in the Prior Year Budget and the Current Year Budget? Please specify the amount.

PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT YEAR ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED	BUDGET REQUEST ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
Not applicable.	Not applicable.	Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of Governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The Department's requested flex will allow the Department to utilize available resources in the most effective manner as the need arises. Flexibility (50%) between House bill sections will allow for continuity of operations as DCPH continues to align budget structure with its operating structure. The Department cannot predict how much flexibility will be utilized.

3. Please explain how flexibility was used in the prior and/or current years.

PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
Not applicable.	Not applicable.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
GENETICS AND NEWBRN HLTH SRVCS								
CORE								
TYPIST	0	0.00	0	0.00	3,000	0.17	3,000	0.17
LEAD ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	54,160	1.37	54,160	1.37
REGISTERED NURSE	0	0.00	0	0.00	231,460	3.02	231,460	3.02
REGISTERED NURSE SPEC/SPV	0	0.00	0	0.00	30,214	0.35	30,214	0.35
NURSE MANAGER	0	0.00	0	0.00	64,423	0.94	64,423	0.94
PUBLIC HEALTH PROGRAM ASSOC	0	0.00	0	0.00	63,463	1.47	63,463	1.47
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	285,422	5.19	285,422	5.19
SR PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	95,522	1.55	95,522	1.55
PUBLIC HEALTH PROGRAM SPV	0	0.00	0	0.00	283,994	3.77	283,994	3.77
PUBLIC HEALTH PROGRAM MANAGER	0	0.00	0	0.00	113,545	1.37	113,545	1.37
TOTAL - PS	0	0.00	0	0.00	1,225,203	19.20	1,225,203	19.20
TRAVEL, IN-STATE	0	0.00	0	0.00	30,282	0.00	30,282	0.00
TRAVEL, OUT-OF-STATE	0	0.00	0	0.00	16,746	0.00	16,746	0.00
SUPPLIES	103,105	0.00	104,520	0.00	194,631	0.00	194,631	0.00
PROFESSIONAL DEVELOPMENT	0	0.00	0	0.00	21,242	0.00	21,242	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	7,556	0.00	7,556	0.00
PROFESSIONAL SERVICES	100	0.00	34,100	0.00	169,353	0.00	169,353	0.00
M&R SERVICES	0	0.00	0	0.00	1,372	0.00	1,372	0.00
MOTORIZED EQUIPMENT	0	0.00	0	0.00	217	0.00	217	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	293	0.00	293	0.00
OTHER EQUIPMENT	0	0.00	0	0.00	3,670	0.00	3,670	0.00
BUILDING LEASE PAYMENTS	0	0.00	0	0.00	1,073	0.00	1,073	0.00
MISCELLANEOUS EXPENSES	0	0.00	0	0.00	3,596	0.00	3,596	0.00
TOTAL - EE	103,205	0.00	138,620	0.00	450,031	0.00	450,031	0.00
PROGRAM DISTRIBUTIONS	1,581,226	0.00	1,747,512	0.00	3,043,821	0.00	3,043,821	0.00
REFUNDS	0	0.00	0	0.00	1,380	0.00	1,380	0.00
TOTAL - PD	1,581,226	0.00	1,747,512	0.00	3,045,201	0.00	3,045,201	0.00
GRAND TOTAL	\$1,684,431	0.00	\$1,886,132	0.00	\$4,720,435	19.20	\$4,720,435	19.20
GENERAL REVENUE	\$223,237	0.00	\$236,382	0.00	\$1,387,060	4.82	\$1,387,060	4.82
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$1,513,327	12.42	\$1,513,327	12.42
OTHER FUNDS	\$1,461,194	0.00	\$1,649,750	0.00	\$1,820,048	1.96	\$1,820,048	1.96

PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.730</u>
Genetics and Newborn Health Services	
Program is found in the following core budget(s): Genetics and Newborn Health Services	
<p>1a. What strategic priority does this program address? Build and Strengthen Partnerships; Use Clear and Consistent Communication to Build Trust; Expand Access to Service.</p> <p>1b. What does this program do? The Genetics and Newborn Services program provides education, outreach, and interventions to improve prenatal, maternal, and child health; increase healthier births; promote normal growth and development outcomes; increase school readiness; and facilitate healthy outcomes throughout the lifespan. The program develops and disseminates educational materials, social media messages, and multimedia marketing campaigns to educate the public on healthy behaviors. Primary program activities and priorities are outlined below:</p> <ul style="list-style-type: none"> • Encouraging early entrance into prenatal care. • Providing education on healthy behaviors starting at preconception, including: <ul style="list-style-type: none"> * the Count the Kicks program to reduce still births; * the use of folic acid to reduce birth defects; * the importance of avoiding smoking, alcohol, and other drugs during pregnancy; * breastfeeding promotion; and * helping families learn healthy parenting skills. • Providing case management, education, and awareness for Hepatitis B (HBV) including information on disease transmission, disease process, diagnosis, and treatment, to clinical and social service providers, infected and affected individuals, and the general public to ensure infants born to HBV positive women receive timely and complete vaccination to prevent infection. • Administering a confidential, toll-free Maternal Child Health Information and Referral telephone and texting line (TEL-LINK) that connects families with programs and services; • Administering Newborn Screening Programs, which encompass the following: <ul style="list-style-type: none"> * newborn blood spot screening tracking and follow-up for over 70 different rare disorders to prevent death and disability; * early identification, diagnosis, and intervention for hearing loss to ensure communication milestones are achieved; * education, outreach, and technical assistance for families, providers, hospitals, and the general public. • Collaborating with child abuse medical resource centers to provide training, support, and mentoring to Sexual Assault Forensic Examination-Child Abuse Resource and Education (SAFE-CARE) medical providers. • Providing screening, diagnostic evaluations, treatment, and counseling for Missourians with genetic conditions. • Providing metabolic formula for adults and children with metabolic conditions. 	

PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.730</u>
Genetics and Newborn Health Services	
Program is found in the following core budget(s): Genetics and Newborn Health Services	
2a. Provide an activity measure(s) for the program.	

Clients Served by Newborn Health Services	FFY 2021	FFY 2022	FFY 2023 Proj.	FFY 2024 Proj.	FFY 2025 Proj.	FFY 2026 Proj.
Educational Materials Distributed	251,048	233,675	250,000	250,000	250,000	250,000
Number of TEL-LINK Referrals	2,952	2,721	2,750	2,750	2,750	2,750

Newborn Blood Spot Screening Tracking and Follow-up						
The Missouri Newborn Blood Spot Screening Program tracked, followed, and provided educational information to the parents of:	CY 2021	CY 2022	CY 2023	CY 2024 Proj.	CY 2025 Proj.	CY 2026 Proj.
Newborns referred to contracted referral centers for follow-up of abnormal newborn blood spot screening results.	553	571	437	600	600	600
Newborns diagnosed with disorders identified through newborn blood spot screening.	226	208	200*	200	200	200
Newborns with hemoglobinopathy trait identified through newborn blood spot screening.	1,603	1,497	1,382	1,500	1,500	1,500
Newborns who need a repeat blood spot screening.	3,287	3,488	3,942	3,200	3,200	3,200

*Projected, final data will be available November 2024.

Newborn Hearing Screening Tracking and Follow-up						
The Missouri Newborn Hearing Screening Program tracked, followed, and provided educational information to the parents of:	CY 2021	CY 2022	CY 2023	CY 2024 Proj.	CY 2025 Proj.	CY 2026 Proj.
Newborns who failed to pass their initial newborn hearing screening.	2,877	2,814	2,323	2,800	2,800	2,800
Newborns who missed their hearing screening.	709	833	700*	700	700	700
Newborns who were diagnosed with permanent hearing loss and referred to early intervention via Missouri's Part C Program, First Steps.	104	115	115**	115	115	115

*Projected, final data will be available June 2024.

**Projected, final data will be available after December 31, 2024.

PROGRAM DESCRIPTION

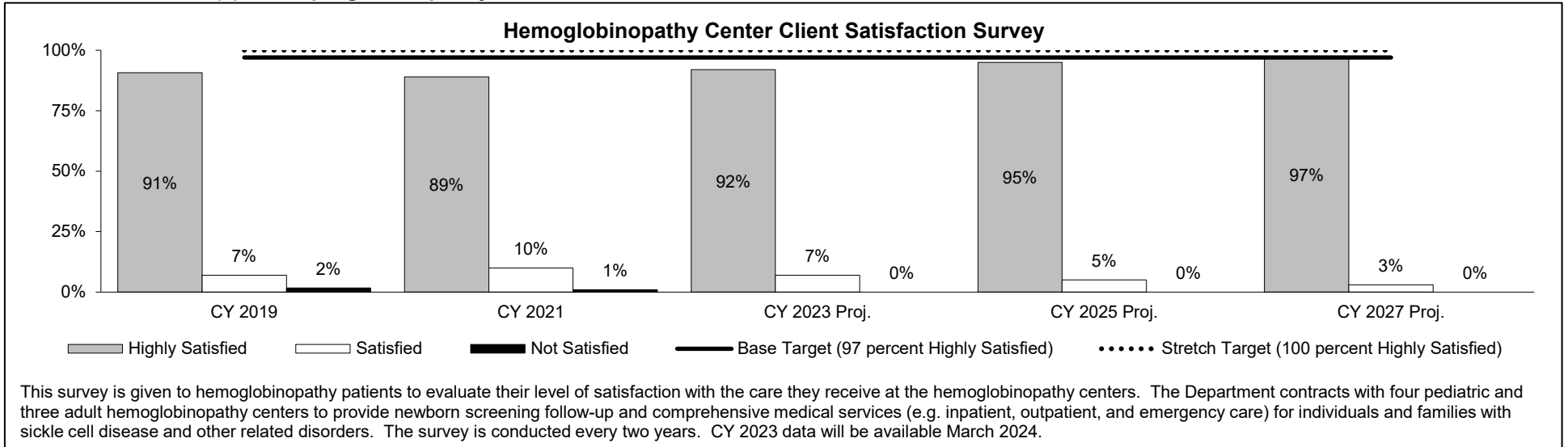
Health and Senior Services

HB Section(s): 10.730

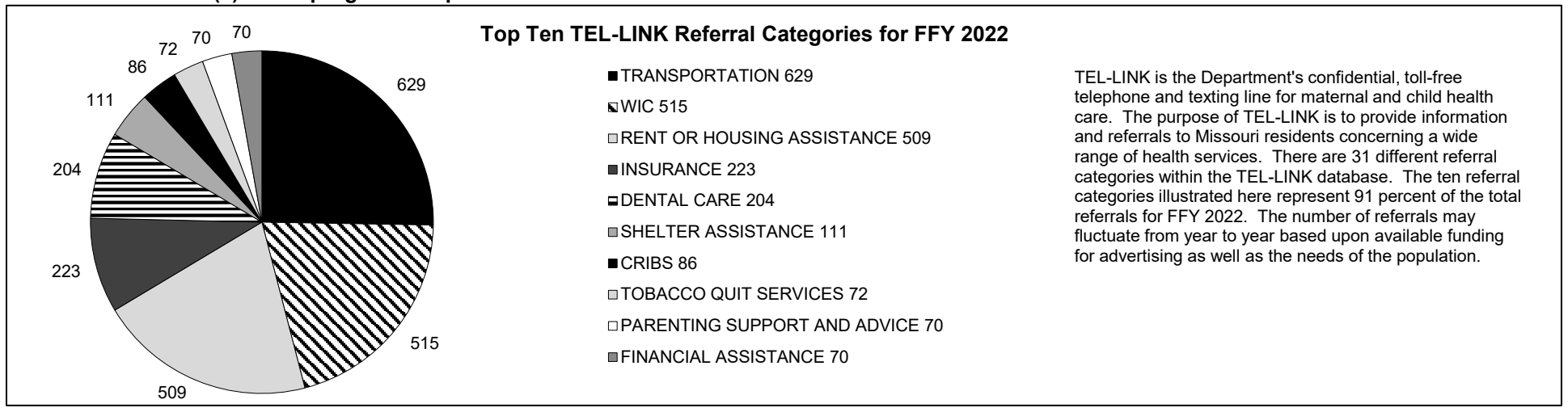
Genetics and Newborn Health Services

Program is found in the following core budget(s): Genetics and Newborn Health Services

2b. Provide a measure(s) of the program's quality.



2c. Provide a measure(s) of the program's impact.



PROGRAM DESCRIPTION

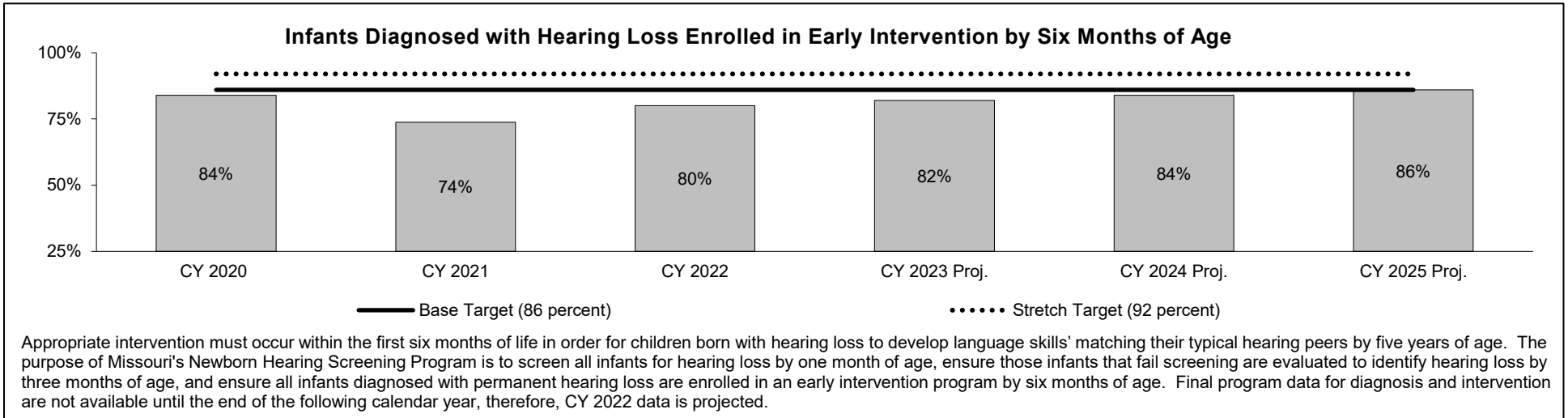
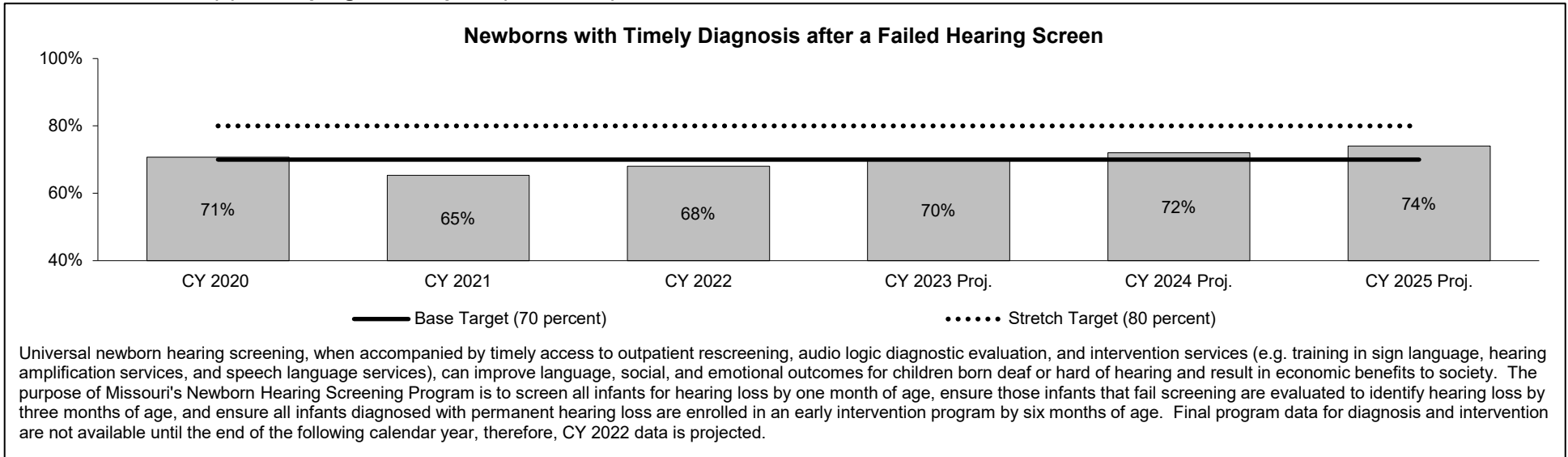
Health and Senior Services

HB Section(s): 10.730

Genetics and Newborn Health Services

Program is found in the following core budget(s): Genetics and Newborn Health Services

2c. Provide a measure(s) of the program's impact. (continued)



PROGRAM DESCRIPTION

Health and Senior Services

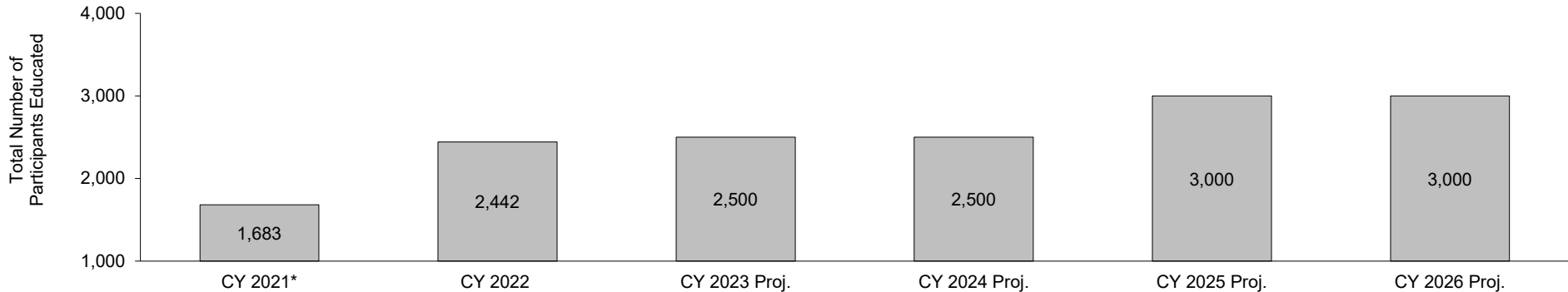
HB Section(s): 10.730

Genetics and Newborn Health Services

Program is found in the following core budget(s): Genetics and Newborn Health Services

2c. Provide a measure(s) of the program's impact. (continued)

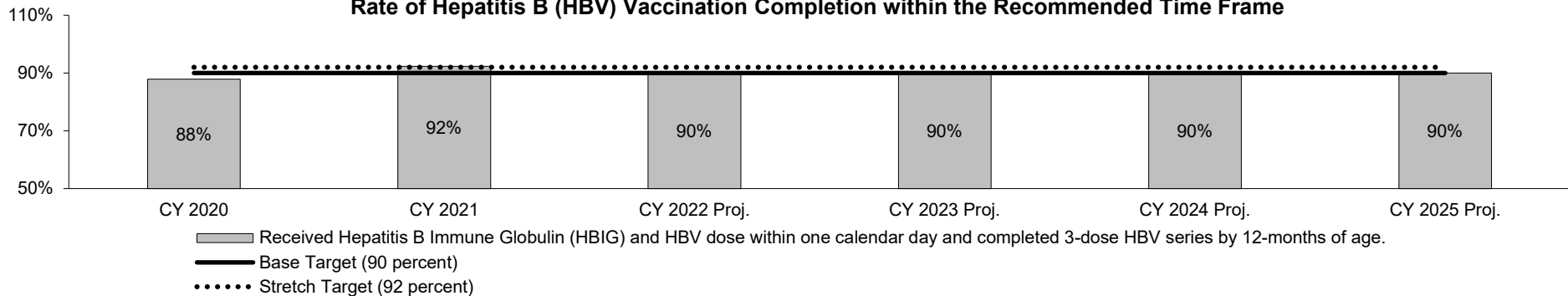
Education using Substance Exposed Infant Manikins



Substance exposed infant manikins are provided to 32 various sites for educational outreach. Each site receives, at no cost, infant manikins representing Caucasian and African American infants with Fetal Alcohol Syndrome, prenatal drug exposure, and healthy characteristics. Community placement sites utilize the manikins to provide education to groups such as communities, expectant parents, grandparents, treatment clinics, WIC clients, educators, students, and health care providers. Each site reports data back to the Department for each presentation or exhibit for which the manikins are used, documenting the number of participants who received education. CY 23 data will not be available until after January 31, 2024.

*The COVID-19 pandemic affected face-to-face services for these sites, which caused a decrease in utilization of the manikins.

Rate of Hepatitis B (HBV) Vaccination Completion within the Recommended Time Frame



Perinatal HBV case management increases the likelihood that babies who are born to HBV positive mothers are vaccinated for HBV at birth and receive the full three month dose HBV Series by 12 months of age. Receipt of the full HBV series ensures HBV immunity among most vaccinated babies and decreases the likelihood of associated negative health outcomes including chronic HBV infection and liver disease. Approximately 120 infants are served by Missouri's perinatal HBV case management program each year. Vaccination completion data is not available until after the end of the following calendar year, therefore, CY 2022 data is projected. Base and Stretch targets are based on CDC defined goals for perinatal HBV programs.

PROGRAM DESCRIPTION

Health and Senior Services

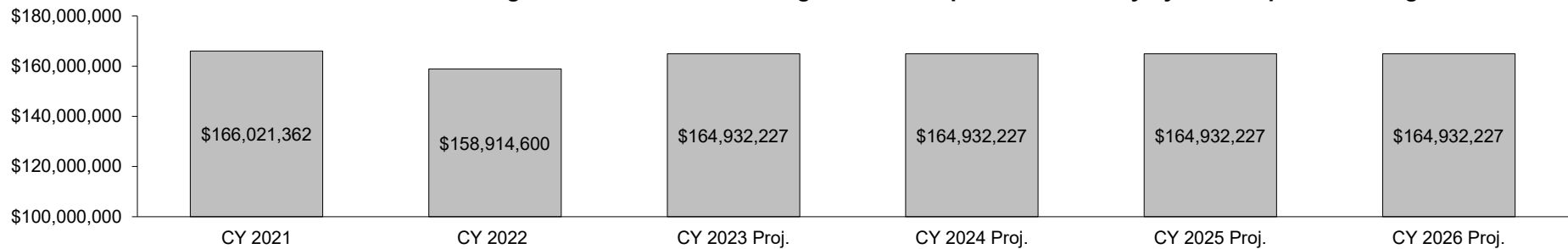
HB Section(s): 10.730

Genetics and Newborn Health Services

Program is found in the following core budget(s): Genetics and Newborn Health Services

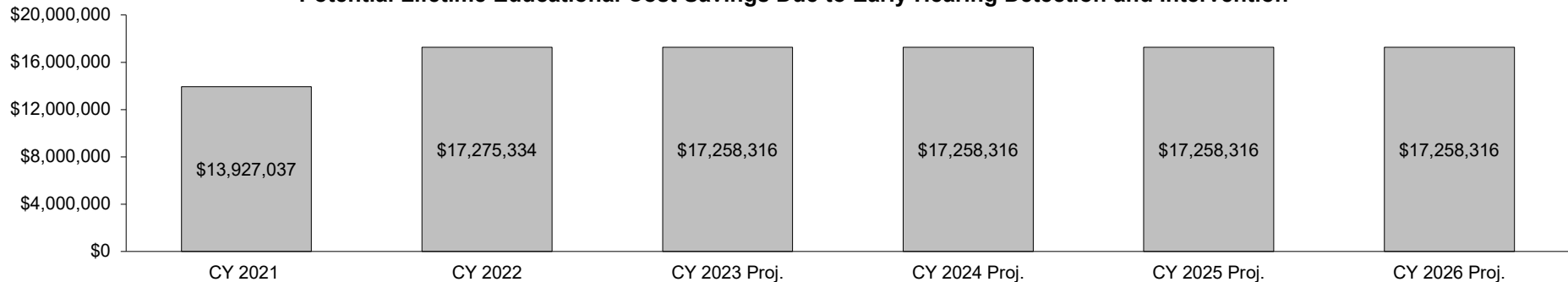
2d. Provide a measure(s) of the program's efficiency.

Potential Lifetime Cost Savings Due to Prevention of Cognitive Developmental Disability by Blood Spot Screening



In 2003, the Centers for Disease Control and Prevention (CDC) estimated the average lifetime costs per person with cognitive developmental disability to be approximately \$1,014,000. The U.S. Bureau of Labor Statistics Consumer Price Index Inflation Calculator was used to calculate inflation over time. The number of disorders detected varies from year to year due to variables in incidence. The numbers of infants represented in this chart only includes those with disorders on the blood spot screening panel where cognitive developmental disability is a symptom and where there is evidence to show that early diagnosis and treatment prevents this specific disability. Disorders included are: biotinidase deficiency, congenital adrenal hyperplasia, congenital primary hypothyroidism, galactosemia, amino acid disorders, fatty acid disorders, and organic acid disorders. Additional cost savings are likely associated with the remaining blood spot disorders, however, there is not sufficient data to provide a dollar estimate. The program did not set targets as it is not possible to project the number of children identified with the specified conditions. CY 23 data will not be available until November 2024.

Potential Lifetime Educational Cost Savings Due to Early Hearing Detection and Intervention



The CDC estimated the lifetime educational cost of undiagnosed or untreated hearing loss at \$115,600 per child (year 2007 value for permanent hearing loss without other disabilities). The CDC estimated cost of newborn hearing screening was \$26 in 2010. The U.S. Bureau of Labor Statistics Consumer Price Index Inflation Calculator was used to calculate inflation over time. Total savings was calculated as difference in the number of infants diagnosed times average lifetime cost and the cost of hearing screening times total newborns screened. The program did not set targets as it is not possible to project the number of children identified with the specified conditions. CY 2023 data will not be available until December 31, 2024.

PROGRAM DESCRIPTION

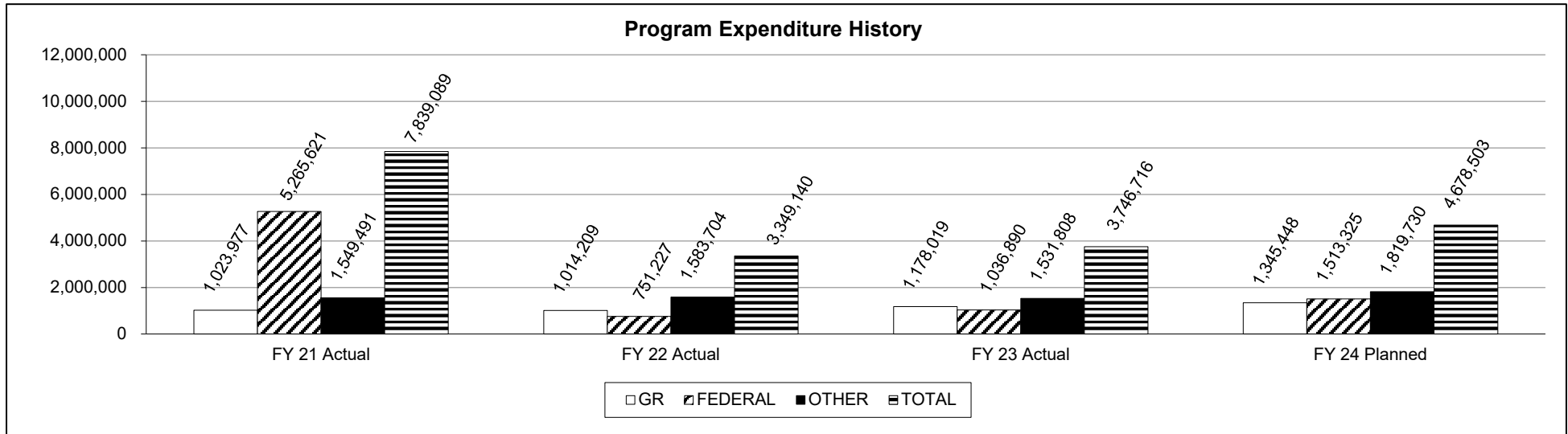
Health and Senior Services

HB Section(s): 10.730

Genetics and Newborn Health Services

Program is found in the following core budget(s): Genetics and Newborn Health Services

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe



4. What are the sources of the "Other " funds?

Health Initiatives Fund (0275) and Missouri Public Health Services (0298).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 191.300 - 191.380 RSMo (Adult Genetics and Metabolic Formula; Sections 191.331 - 191.332 RSMo (Newborn Blood Spot Screening)); Sections 191.925 - 191.931, RSMo (Newborn Hearing Screening); Section 191.334, RSMo (Newborn Critical Congenital Heart Disease Screening); Section 191.725, RSMo (Prenatal Substance Use Prevention Program); Section 194.117, RSMo (Sudden Infant Death Syndrome); the Federal Omnibus Budget Reconciliation Act OBRA 89 and Section 192.601, RSMo (TEL-LINK).

6. Are there federal matching requirements? If yes, please explain.

Yes. The Title V Maternal and Child Health Services Block Grant partially supports this program and requires a three dollar non-federal match for every four dollars of federal funds received, and requires maintenance of effort.

7. Is this a federally mandated program? If yes, please explain.

Yes. The Maternal Child Health Information and Referral Line (TEL-LINK) is mandated under the Federal Omnibus and Reconciliation Act (OBRA 89).

CORE DECISION ITEM

Health and Senior Services					Budget Unit 58595C				
Community and Public Health									
Core - Health Informatics and Epidemiology					HB Section 10.735				
1. CORE FINANCIAL SUMMARY									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	1,013,528	2,074,768	93,099	3,181,395	PS	1,013,528	2,074,768	93,099	3,181,395
EE	0	219,702	101,625	321,327	EE	0	219,702	101,625	321,327
PSD	0	2,313,514	0	2,313,514	PSD	0	2,313,514	0	2,313,514
TRF	0	0	0	0	TRF	0	0	0	0
Total	1,013,528	4,607,984	194,724	5,816,236	Total	1,013,528	4,607,984	194,724	5,816,236
FTE	13.48	35.17	6.51	55.16	FTE	13.48	35.17	6.51	55.16
Est. Fringe	580,198	1,301,484	132,472	2,014,154	Est. Fringe	580,198	1,301,484	132,472	2,014,154
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.				
Federal Funds: Department of Health and Senior Services Federal Fund (0143) and Temporary Assistance Needy Family Federal (0199). Other Funds: Health Initiatives (0275), Department of Health and Senior Services Document Services (0646).									
2. CORE DESCRIPTION									
The Health Informatics and Epidemiology unit is responsible for collecting, analyzing, and providing health information on a range of health conditions and diseases, risk factors, and preventative practices. It houses the resources necessary to operate and maintain major public health information systems; state vital statistics; community health information; and medical and public health epidemiology resources necessary to prevent, intervene, and control diseases and conditions impacting the health and wellness of Missourians.									
The unit is involved in health data collection, from the enumeration of the population at risk (e.g. birth and death records) to health-care related experiences of Missourians, (e.g. managing the Patient Abstract System, health data abstracting, and healthcare infections reporting) communicable (infectious) diseases, sexually transmitted infections (STIs) and zoonotic diseases; the Missouri Cancer Registry (MCR); the Pregnancy Mortality Surveillance System (PMSS); the State Unintentional Drug Overdose Reporting System (SUDORS), and the Missouri Violent Death Reporting System (MOVDRS); the dissemination of health statistics (e.g. Missouri Public Health Information Management System (MOPHIMS)); and the distribution of downloadable public service announcements, brochures and other information; as well as statewide reportable surveillance systems (Websurv and EpiTrax); the HIV/AIDS reporting system (eHARS), and the Missouri Electronic Surveillance System for Early Notification of Community-Based Epidemics (ESSENCE). The unit manages the collection, analysis, and interpretation of data (e.g. Behavioral Risk Factor Surveillance System (BRFSS), a system for collecting state and local level data regarding health-related risk behaviors, chronic health conditions, and the use of preventative services; and the Pregnancy Risk Assessment Monitoring System (PRAMS) which collects state-specific, population-based data on maternal attitudes and experiences before, during and shortly after pregnancy.									

CORE DECISION ITEM

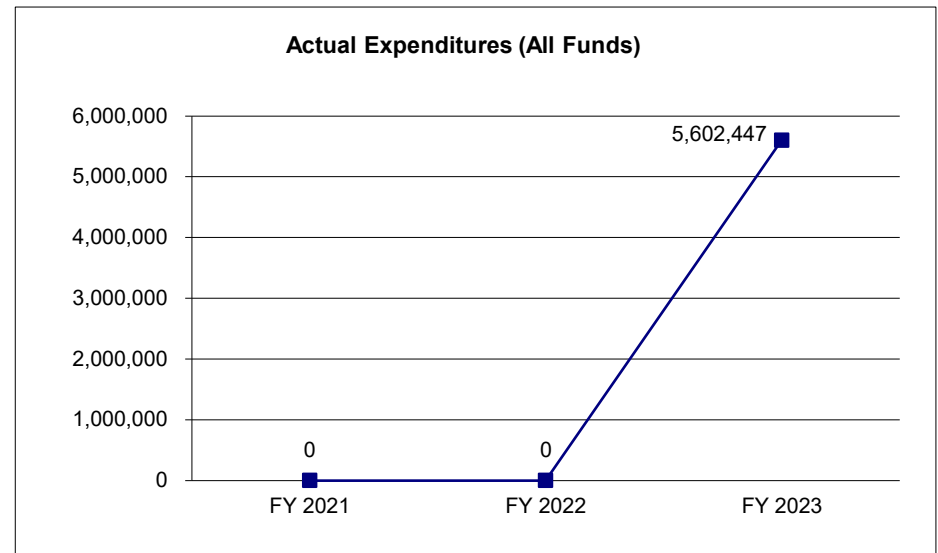
Health and Senior Services	Budget Unit 58595C
Community and Public Health	
Core - Health Informatics and Epidemiology	HB Section 10.735

3. PROGRAM LISTING (list programs included in this core funding)

Behavioral Risk Factor Surveillance System (BRFSS)	Patient Abstract System (PAS)
Chronic Disease Surveillance and Evaluation	Pregnancy Risk Assessment Monitoring System (PRAMS)
Communicable Disease Surveillance and Data Analysis	Youth Risk Behavior Survey (YRBS)
County-Level Study (CLS)	Youth Tobacco Survey (YTS)
Missouri Cancer Registry (MCR)	
Missouri Electronic Surveillance System for Early Notification of Community-Based Epidemics (ESSENCE)	
Missouri Information for Community Assessment (MICA)	
Missouri Violent Death Reporting System (MOVDRS)	

4. FINANCIAL HISTORY

	FY 2021 Actual	FY 2022 Actual	FY 2023 Actual	FY 2024 Current Yr.
Appropriation (All Funds)	0	0	5,743,032	5,816,236
Less Reverted (All Funds)	0	0	(22,489)	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	0	0	5,720,543	5,816,236
Actual Expenditures (All Funds)	0	0	5,602,447	N/A
Unexpended (All Funds)	0	0	118,096	N/A
Unexpended, by Fund:				
General Revenue	0	0	980	N/A
Federal	0	0	4,767	N/A
Other	0	0	112,352	N/A



Reverted includes the statutory three percent reserve amount (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES HLTH INFORMATICS AND EPI

5. CORE RECONCILIATION DETAIL

				Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS										
Core Reallocation	800	5194	PS		0.44	23,604	0	0	23,604	CORE reallocations for programmatic alignment.
Core Reallocation	800	5045	PS		13.04	989,924	0	0	989,924	CORE reallocations for programmatic alignment.
Core Reallocation	800	5709	PS		0.00	0	53,499	0	53,499	CORE reallocations for programmatic alignment.
Core Reallocation	800	5195	PS		0.29	0	26,739	0	26,739	CORE reallocations for programmatic alignment.
Core Reallocation	800	5712	PS		6.51	0	0	93,099	93,099	CORE reallocations for programmatic alignment.
Core Reallocation	800	5047	PS		34.88	0	1,994,530	0	1,994,530	CORE reallocations for programmatic alignment.
Core Reallocation	800	5048	EE		0.00	0	199,333	0	199,333	CORE reallocations for programmatic alignment.
Core Reallocation	800	5710	EE		0.00	0	5,671	0	5,671	CORE reallocations for programmatic alignment.
Core Reallocation	800	5809	EE		0.00	0	0	33,577	33,577	CORE reallocations for programmatic alignment.
Core Reallocation	800	5713	EE		0.00	0	0	68,048	68,048	CORE reallocations for programmatic alignment.
Core Reallocation	800	5049	EE		0.00	0	14,698	0	14,698	CORE reallocations for programmatic alignment.
Core Reallocation	800	5049	PD		0.00	0	2,295,838	0	2,295,838	CORE reallocations for programmatic alignment.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES HLTH INFORMATICS AND EPI

5. CORE RECONCILIATION DETAIL

			Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS									
Core Reallocation	800	5048	PD	0.00	0	17,676	0	17,676	CORE reallocations for programmatic alignment.
NET DEPARTMENT CHANGES				55.16	1,013,528	4,607,984	194,724	5,816,236	
DEPARTMENT CORE REQUEST									
			PS	55.16	1,013,528	2,074,768	93,099	3,181,395	
			EE	0.00	0	219,702	101,625	321,327	
			PD	0.00	0	2,313,514	0	2,313,514	
			Total	55.16	1,013,528	4,607,984	194,724	5,816,236	
GOVERNOR'S RECOMMENDED CORE									
			PS	55.16	1,013,528	2,074,768	93,099	3,181,395	
			EE	0.00	0	219,702	101,625	321,327	
			PD	0.00	0	2,313,514	0	2,313,514	
			Total	55.16	1,013,528	4,607,984	194,724	5,816,236	

DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HLTH INFORMATICS AND EPI									
CORE									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	1,013,528	13.48	1,013,528	13.48	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	2,021,269	35.17	2,021,269	35.17	
TEMP ASSIST NEEDY FAM FEDERAL	0	0.00	0	0.00	53,499	0.00	53,499	0.00	
DEPT HEALTH & SR SV DOCUMENT	0	0.00	0	0.00	93,099	6.51	93,099	6.51	
TOTAL - PS	0	0.00	0	0.00	3,181,395	55.16	3,181,395	55.16	
EXPENSE & EQUIPMENT									
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	214,031	0.00	214,031	0.00	
TEMP ASSIST NEEDY FAM FEDERAL	0	0.00	0	0.00	5,671	0.00	5,671	0.00	
HEALTH INITIATIVES	0	0.00	0	0.00	33,577	0.00	33,577	0.00	
DEPT HEALTH & SR SV DOCUMENT	0	0.00	0	0.00	68,048	0.00	68,048	0.00	
TOTAL - EE	0	0.00	0	0.00	321,327	0.00	321,327	0.00	
PROGRAM-SPECIFIC									
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	2,313,514	0.00	2,313,514	0.00	
TOTAL - PD	0	0.00	0	0.00	2,313,514	0.00	2,313,514	0.00	
TOTAL	0	0.00	0	0.00	5,816,236	55.16	5,816,236	55.16	
Pay Plan - 0000012									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	96,259	0.00	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	0	0.00	856	0.00	
TEMP ASSIST NEEDY FAM FEDERAL	0	0.00	0	0.00	0	0.00	1,712	0.00	
DEPT HEALTH & SR SV DOCUMENT	0	0.00	0	0.00	0	0.00	2,978	0.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	101,805	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	101,805	0.00	
GRAND TOTAL	\$0	0.00	\$0	0.00	\$5,816,236	55.16	\$5,918,041	55.16	

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58595C BUDGET UNIT NAME: Health Informatics and Epidemiology HOUSE BILL SECTION: 10.735	DEPARTMENT: Department of Health and Senior Services (DHSS) DIVISION: Division of Community and Public Health (DCPH)
1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.	
DEPARTMENT REQUEST	
DHSS has worked to create and breakdown CORES within DCPH in order to align the budget structure with the division's operations. The Department requests fifty percent (50%) flexibility between House Bills 10.700, 10.705, 10.710, 10.715, 10.720, 10.725, 10.730, 10.735, 10.740, 10.745, 10.750, 10.755, 10.760, 10.765, 10.770, and 10.775 in order to ensure continuity of operations during the transition.	
2. Estimate how much flexibility will be used for the budget year. How much flexibility was used in the Prior Year Budget and the Current Year Budget? Please specify the amount.	
PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT YEAR ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
Not applicable.	Not applicable.
BUDGET REQUEST ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED	
Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of Governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The Department's requested flex will allow the Department to utilize available resources in the most effective manner as the need arises. Flexibility (50%) between House bill sections will allow for continuity of operations as DCPH continues to align budget structure with its operating structure. The Department cannot predict how much flexibility will be utilized.	
3. Please explain how flexibility was used in the prior and/or current years.	
PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
Not applicable.	Not applicable.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HLTH INFORMATICS AND EPI								
CORE								
PROJECT SPECIALIST	0	0.00	0	0.00	216,658	2.70	216,658	2.70
ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	58,806	1.71	58,806	1.71
LEAD ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	101,661	2.01	101,661	2.01
SENIOR PROGRAM SPECIALIST	0	0.00	0	0.00	82,949	1.00	82,949	1.00
ASSOC RESEARCH/DATA ANALYST	0	0.00	0	0.00	203,041	4.47	203,041	4.47
RESEARCH/DATA ANALYST	0	0.00	0	0.00	702,440	16.40	702,440	16.40
SENIOR RESEARCH/DATA ANALYST	0	0.00	0	0.00	511,150	7.46	511,150	7.46
RESEARCH DATA ANALYSIS SPV/MGR	0	0.00	0	0.00	185,787	1.76	185,787	1.76
REGISTERED NURSE	0	0.00	0	0.00	23,604	0.44	23,604	0.44
ASSOCIATE EPIDEMIOLOGIST	0	0.00	0	0.00	265,376	5.06	265,376	5.06
EPIDEMIOLOGIST	0	0.00	0	0.00	333,448	5.42	333,448	5.42
SENIOR EPIDEMIOLOGIST	0	0.00	0	0.00	223,479	2.72	223,479	2.72
PUBLIC HEALTH PROGRAM ASSOC	0	0.00	0	0.00	72,310	1.46	72,310	1.46
PUBLIC HEALTH PROGRAM MANAGER	0	0.00	0	0.00	200,686	2.55	200,686	2.55
TOTAL - PS	0	0.00	0	0.00	3,181,395	55.16	3,181,395	55.16
TRAVEL, IN-STATE	0	0.00	0	0.00	33,377	0.00	33,377	0.00
TRAVEL, OUT-OF-STATE	0	0.00	0	0.00	23,875	0.00	23,875	0.00
SUPPLIES	0	0.00	0	0.00	109,664	0.00	109,664	0.00
PROFESSIONAL DEVELOPMENT	0	0.00	0	0.00	28,705	0.00	28,705	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	4,784	0.00	4,784	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	94,132	0.00	94,132	0.00
M&R SERVICES	0	0.00	0	0.00	19,707	0.00	19,707	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	240	0.00	240	0.00
OTHER EQUIPMENT	0	0.00	0	0.00	3,009	0.00	3,009	0.00
BUILDING LEASE PAYMENTS	0	0.00	0	0.00	881	0.00	881	0.00
MISCELLANEOUS EXPENSES	0	0.00	0	0.00	2,953	0.00	2,953	0.00
TOTAL - EE	0	0.00	0	0.00	321,327	0.00	321,327	0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HLTH INFORMATICS AND EPI								
CORE								
PROGRAM DISTRIBUTIONS	0	0.00	0	0.00	2,313,514	0.00	2,313,514	0.00
TOTAL - PD	0	0.00	0	0.00	2,313,514	0.00	2,313,514	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$5,816,236	55.16	\$5,816,236	55.16
GENERAL REVENUE								
	\$0	0.00	\$0	0.00	\$1,013,528	13.48	\$1,013,528	13.48
FEDERAL FUNDS								
	\$0	0.00	\$0	0.00	\$4,607,984	35.17	\$4,607,984	35.17
OTHER FUNDS								
	\$0	0.00	\$0	0.00	\$194,724	6.51	\$194,724	6.51

PROGRAM DESCRIPTION

Department of Health and Senior Services	HB Section(s): <u>10.735</u>																																										
Health Informatics and Epidemiology																																											
Program is found in the following core budget(s): Health Informatics and Epidemiology																																											
<p>1a. What strategic priority does this program address? Invest in Innovation to Modernize Infrastructure, Expand Access to Services, and Build and Strengthen Partnerships.</p> <p>1b. What does this program do? The Health Informatics and Epidemiology unit is responsible for collecting, analyzing, and providing health information on a range of health conditions and diseases, risk factors, and preventative practices. It houses the resources necessary to operate and maintain major public health information systems, state vital statistics, community health information, and medical and public health epidemiology resources necessary to prevent, intervene, and control diseases and conditions impacting the health wellness of Missourians.</p> <p>The unit is involved in health data collection, from the enumeration of the population at risk (e.g. birth and death records) to health-care related experiences of Missourians, (e.g. managing the Patient Abstract System, health data abstracting, healthcare infections reporting) communicable (infectious) diseases, sexually transmitted infections (STIs) and zoonotic diseases; the collection, analysis, and interpretation of data (e.g. Behavioral Risk Factor Surveillance System (BRFSS); the Pregnancy Risk Assessment Monitoring System (PRAMS); the Missouri Cancer Registry (MCR); the Pregnancy Mortality Surveillance System (PMSS); the State Unintentional Drug Overdose Reporting System (SUDORS), and the Missouri Violent Death Reporting System (MOVDRS); the dissemination of health statistics (e.g. Missouri Public Health Information Management System (MOPHIMS); and the distribution of downloadable public service announcements, brochures, and other information; as well as statewide reportable surveillance systems (Websurv and EpiTrax); the HIV/AIDS reporting system (eHARS), and the Missouri Electronic Surveillance System for Early Notification of Community-Based Epidemics (ESSENCE).</p> <p>2a. Provide an activity measure(s) for the program.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th colspan="7" style="text-align: center;">Health Information Services Provided</th> </tr> <tr> <th></th> <th style="text-align: center;">FY 2021</th> <th style="text-align: center;">FY 2022</th> <th style="text-align: center;">FY 2023</th> <th style="text-align: center;">FY 2024 Proj.</th> <th style="text-align: center;">FY 2025 Proj.</th> <th style="text-align: center;">FY 2026 Proj.</th> </tr> </thead> <tbody> <tr> <td>Data Requests</td> <td style="text-align: center;">1,444</td> <td style="text-align: center;">1,360</td> <td style="text-align: center;">767</td> <td style="text-align: center;">898</td> <td style="text-align: center;">911</td> <td style="text-align: center;">933</td> </tr> <tr> <td>Exhibits</td> <td style="text-align: center;">11</td> <td style="text-align: center;">5</td> <td style="text-align: center;">10</td> <td style="text-align: center;">9</td> <td style="text-align: center;">10</td> <td style="text-align: center;">9</td> </tr> <tr> <td>Customized Presentations</td> <td style="text-align: center;">137</td> <td style="text-align: center;">73</td> <td style="text-align: center;">43</td> <td style="text-align: center;">56</td> <td style="text-align: center;">60</td> <td style="text-align: center;">64</td> </tr> <tr> <td>Publications</td> <td style="text-align: center;">39</td> <td style="text-align: center;">6</td> <td style="text-align: center;">54</td> <td style="text-align: center;">33</td> <td style="text-align: center;">36</td> <td style="text-align: center;">39</td> </tr> </tbody> </table> <p style="font-size: small; margin-top: 5px;">The number of data requests and customized presentations in FY 2021 and FY 2022 were significantly higher than in prior years due to the increased demand for COVID-19 related prevalence, hospitalization, mortality, and vaccine data. FY 2023 saw a return to more normal levels of requests.</p>		Health Information Services Provided								FY 2021	FY 2022	FY 2023	FY 2024 Proj.	FY 2025 Proj.	FY 2026 Proj.	Data Requests	1,444	1,360	767	898	911	933	Exhibits	11	5	10	9	10	9	Customized Presentations	137	73	43	56	60	64	Publications	39	6	54	33	36	39
Health Information Services Provided																																											
	FY 2021	FY 2022	FY 2023	FY 2024 Proj.	FY 2025 Proj.	FY 2026 Proj.																																					
Data Requests	1,444	1,360	767	898	911	933																																					
Exhibits	11	5	10	9	10	9																																					
Customized Presentations	137	73	43	56	60	64																																					
Publications	39	6	54	33	36	39																																					

PROGRAM DESCRIPTION

Department of Health and Senior Services

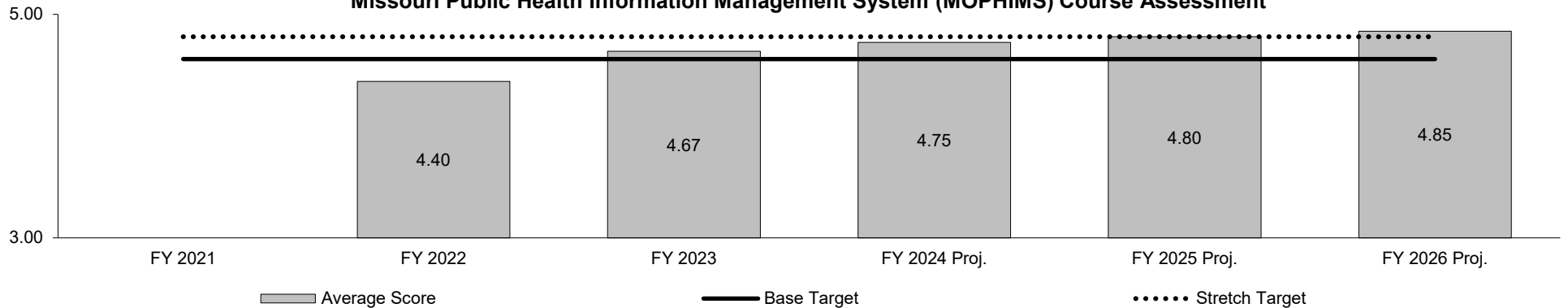
HB Section(s): 10.735

Health Informatics and Epidemiology

Program is found in the following core budget(s): Health Informatics and Epidemiology

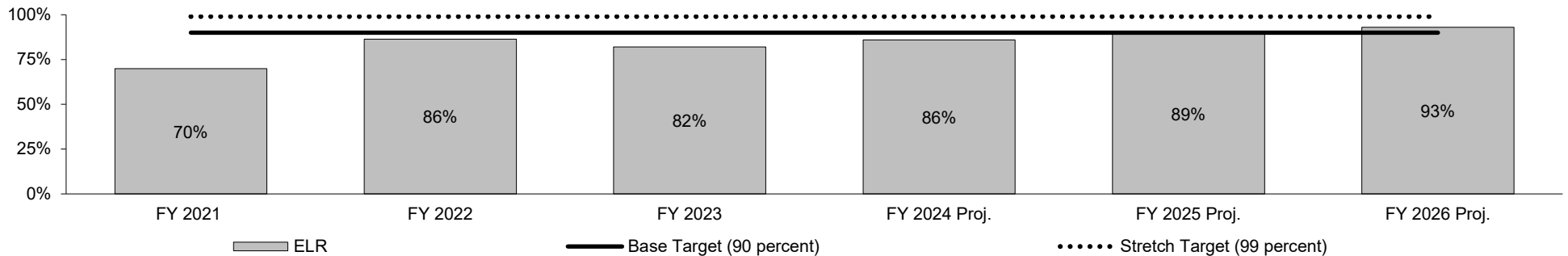
2b. Provide a measure(s) of the program's quality.

Missouri Public Health Information Management System (MOPHIMS) Course Assessment



Rating 1 to 5, with 5 being the best. Due to COVID-19, no trainings were offered in FY 2021. The FY 2022 rating is based on a one hour webinar. The Missouri Public Health Information Management System (MOPHIMS) is a freely accessible web query system that allows users to access health data information that can help inform priorities, programs, and interventions in their communities. Primary data sources: MOPHIMS web query system, Missouri vital statistics, Patient Abstract System (PAS), and BRFSS.

Communicable Disease Results Processed via Electronic Laboratory Reporting (ELR)



ELR allows faster processing of incoming reports, leading to faster public health action to reduce morbidity and mortality. A slight decrease was observed in electronically ingested results from SFY 2022 to SFY 2023. This decrease occurred because the emergency reporting rule amendment that required the reporting of negative COVID-19 results ended on April 1, 2022. The vast majority of negative COVID-19 results were received via electronic laboratory reporting (ELR). Once negatives were no longer ingested, the overall percentage of ingested results decreased. Also, the Department planned to onboard additional hospitals to ELR in WebSurv during SFY 2023, but was unable to due to limited IT resources. Department of Health and Senior Services (DHSS) is currently in the implementation for the ShowMe WorldCare application to replace WebSurv. ShowMe WorldCare has the capacity for easier onboarding.

PROGRAM DESCRIPTION

Department of Health and Senior Services

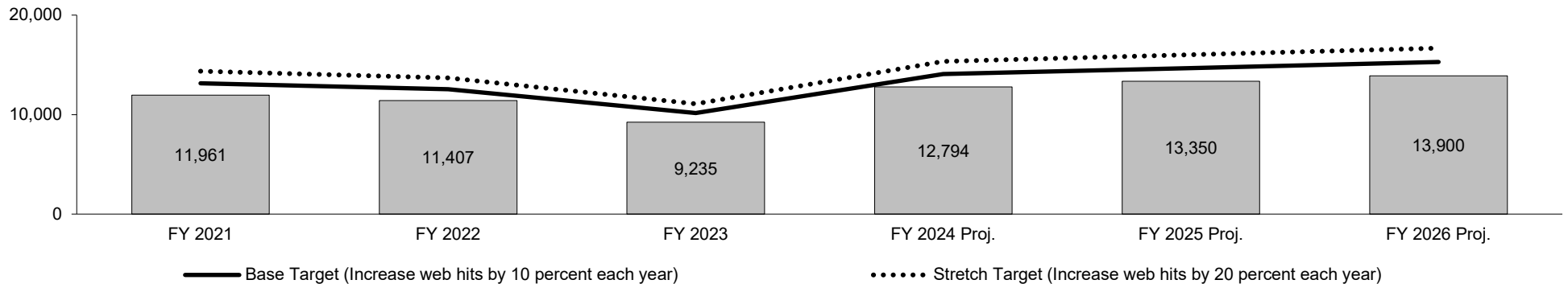
HB Section(s): 10.735

Health Informatics and Epidemiology

Program is found in the following core budget(s): Health Informatics and Epidemiology

2c. Provide a measure(s) of the program's impact.

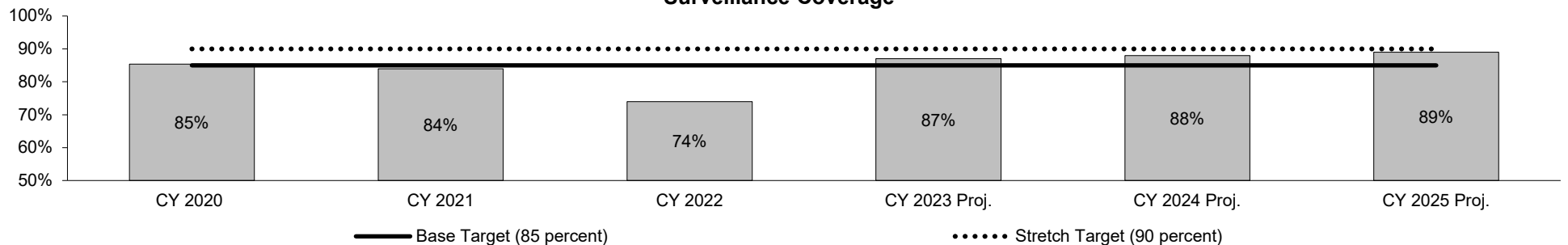
MOPHIMS Web Query System Events: Birth and Death



This table features the frequency of web events or web hits for birth and death data tools. Web hits declined during the COVID-19 pandemic in FY 2021 and FY 2022 as Local Public Health Agencies (LPHAs) had to devote resources to other areas and Department staff were not able to offer any training support. Base target for FY 2022 set based on highest count of previous three years. Future increases project annual 500 hit increase for MICAs.

2d. Provide a measure(s) of the program's efficiency.

Missouri Violent Death Reporting System (MOVDRS) and Enhanced State Opioid Overdose Surveillance (ESOOS) Surveillance Coverage



The MOVDRS and SUDORS projects are ongoing, data surveillance programs that use Death Certificates, Patient Abstract System records, and county-level agency participation for the comprehensive tracking of both violent and opioid-related deaths. The goal of these programs is to build comprehensive databases that will provide a better understanding of the risk factors and circumstances surrounding violent and opioid-related deaths in order to assist prevention efforts in Missouri. Data for MOVDRS for CY 2022 will not be available until the Spring of 2024, therefore, only data for CY 2020 and CY 2021 are presented here. Data is considered complete if the Coroner and Medical Examiner (CME) report is obtained for SUDORS or for MOVDRS if either the CME report is obtained or if the Law Enforcement report is obtained.

PROGRAM DESCRIPTION

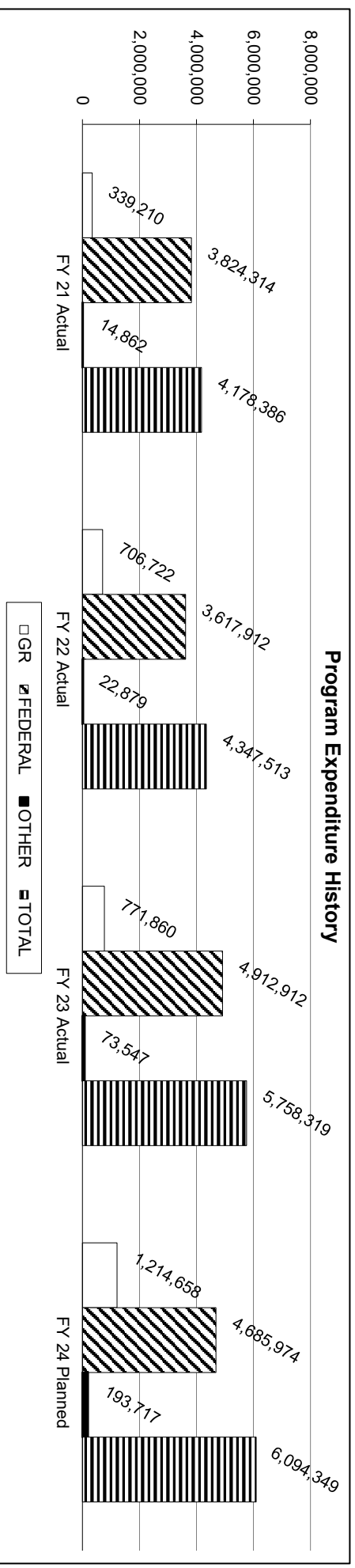
Department of Health and Senior Services

HB Section(s): 10.735

Health Informatics and Epidemiology

Program is found in the following core budget(s): Health Informatics and Epidemiology

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Health Initiatives (0275) and Department of Health and Senior Services Document Services (0646).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 167.183, 188.052, 188.055, 192.020, 192.025, 192.040, 192.067, 192.068, 192.131, 192.323, 192.380, 192.650-657, 192.665-192.667, 193.045, 193.245, 193.255, 210.040, 210.050, 260.391.1(2), and 380.010. Behavioral Risk Factor Surveillance System: 42 USC Section 301 (a)317(k); Missouri Cancer Registry Cancer Information System: Section 192.650-657, RSMo, PL 102-515; Pregnancy Risk Assessment Monitoring System: CDC-RFA-DP06-002; Maternal and Child Health Title V Block Grant: Social Security Act, Title V, Sections 501-510 (USC 701-710, Subchapter V, Chapter 7, Title 42); and National Violent Death Reporting System: CDC-RFA-CE16-1607.

6. Are there federal matching requirements? If yes, please explain.

Yes, the Cancer Registry grant requires one dollar of in-kind match from reporting facilities and the University of Missouri for every three dollars of federal funds and requires maintenance of effort. The Title V Maternal and Child Health (MCH) Block Grant supports portions of the Office of Epidemiology and requires a three dollar non-federal to a four dollar federal match and maintenance of effort.

7. Is this a federally mandated program? If yes, please explain.

Yes, the Cancer Registry is federally mandated (Cancer Registries Amendment Act: PL 102-515).

CORE DECISION ITEM

Health and Senior Services					Budget Unit 58586C				
Community and Public Health									
Core - HIV, STI, and Hepatitis Services					HB Section 10.740				
1. CORE FINANCIAL SUMMARY									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	737,593	1,985,552	0	2,723,145	PS	737,593	1,985,552	0	2,723,145
EE	1,404,834	22,165,482	10,309	23,580,625	EE	1,404,834	22,165,482	10,309	23,580,625
PSD	5,267,783	77,477,639	0	82,745,422	PSD	5,267,783	77,477,639	0	82,745,422
TRF	0	0	0	0	TRF	0	0	0	0
Total	7,410,210	101,628,673	10,309	109,049,192	Total	7,410,210	101,628,673	10,309	109,049,192
FTE	14.33	33.17	0.00	47.50	FTE	14.33	33.17	0.00	47.50
Est. Fringe	490,123	1,238,195	0	1,728,319	Est. Fringe	490,123	1,238,195	0	1,728,319
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.				
Federal Funds: Department of Health and Senior Services Federal (0143).									
Other Funds: Health Initiatives (0275).									

CORE DECISION ITEM

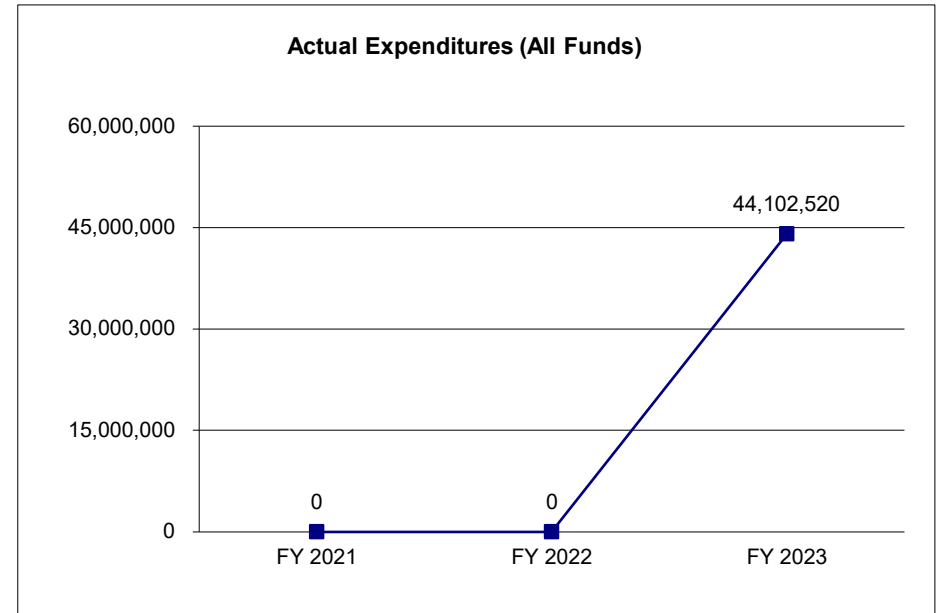
Health and Senior Services Community and Public Health Core - HIV, STI, and Hepatitis Services	Budget Unit <u>58586C</u> HB Section <u>10.740</u>
2. CORE DESCRIPTION	
<p>Educating Missourians regarding Human Immunodeficiency Virus (HIV), sexually transmitted infections (STI) and hepatitis prevention, testing, and linkage to care services is essential to stop the spread of infection, prevent re-infection and prevent poor health outcomes. This program provides HIV, STI, and viral hepatitis education to the general public, those at risk for infection, and clinical providers; access to HIV, STI, and viral hepatitis prevention and testing services; increased access to HIV, STI, and viral hepatitis care and treatment; and a coordinated and efficient use of limited HIV, STI, and viral hepatitis resources to protect health and keep people safe. These outcomes are achieved through the following activities:</p> <ul style="list-style-type: none"> • Providing screening and testing resources for specific, disproportionately affected populations who are underinsured or uninsured. Priority populations vary by condition and are based on epidemiological data and grant priorities. • Delivering services in collaboration with local public health agencies, as well as a network of prevention contractors and testing program partner sites to ensure access to services throughout the state. • Providing disease information, risk reduction counseling, and partner services (including elicitation of sex/needle-sharing partners and confidential notification of exposed partners to offer counseling, testing, and referral for treatment and care). • Providing access to HIV medical care, medication, and related services for low-income Missourians living with HIV to improve individual health outcomes as well, as to reduce HIV transmission rates. Individuals living with HIV for whom the virus is well controlled by HIV medications pose essentially no risk of transmitting the virus through sexual contact. • Facilitating the coordination and collaboration among statewide HIV, STI, and hepatitis service providers and stakeholders to determine program priorities and ensure efficient use of limited resources based on historical epidemiological data and emerging trends. 	
3. PROGRAM LISTING (list programs included in this core funding)	
AIDS Drug Assistance Program (ADAP) Ending the HIV Epidemic Initiatives (EHE) Hepatitis C Prevention, Testing and Health Education HIV/STI Screening, Testing and Prevention Services Housing Opportunities for Persons with AIDS (HOPWA) Program Medicaid AIDS Waiver Pre-exposure Prophylaxis (PrEP) Coordination Ryan White HIV Case Management	

CORE DECISION ITEM

Health and Senior Services	Budget Unit <u>58586C</u>
Community and Public Health	
Core - HIV, STI, and Hepatitis Services	HB Section <u>10.740</u>

4. FINANCIAL HISTORY

	FY 2021	FY 2022	FY 2023	FY 2024
	Actual	Actual	Actual	Current Yr.
Appropriation (All Funds)	0	0	107,523,580	109,049,191
Less Reverted (All Funds)	0	0	(220,487)	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	0	0	107,303,093	109,049,191
Actual Expenditures (All Funds)	0	0	44,102,520	N/A
Unexpended (All Funds)	0	0	63,200,573	N/A
Unexpended, by Fund:				
General Revenue	0	0	864,185	N/A
Federal	0	0	62,329,548	N/A
Other	0	0	6,840	N/A



Reverted includes the statutory three percent reserve amount (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES HIV STD AND HEPATITIS SERVICES

5. CORE RECONCILIATION DETAIL

				Budget Class	FTE	GR	Federal	Other	Total	Explanation
TAFP AFTER VETOES										
				PS	19.39	645,311	404,718	0	1,050,029	
				EE	0.00	1,404,834	21,382,546	0	22,787,380	
				PD	0.00	5,210,283	71,491,741	0	76,702,024	
				Total	19.39	7,260,428	93,279,005	0	100,539,433	
DEPARTMENT CORE ADJUSTMENTS										
Core Reallocation	828	1472	PS	0.00	0	0	0	0	(0)	CORE reallocations for programmatic alignment.
Core Reallocation	828	1471	PS	0.00	0	0	0	0	0	CORE reallocations for programmatic alignment.
Core Reallocation	828	5199	PS	0.82	0	76,396	0	0	76,396	CORE reallocations for programmatic alignment.
Core Reallocation	828	5050	PS	0.78	59,522	0	0	0	59,522	CORE reallocations for programmatic alignment.
Core Reallocation	828	5051	PS	25.89	0	1,504,438	0	0	1,504,438	CORE reallocations for programmatic alignment.
Core Reallocation	828	5198	PS	0.62	32,760	0	0	0	32,760	CORE reallocations for programmatic alignment.
Core Reallocation	828	5810	EE	0.00	0	0	10,309	10,309	10,309	CORE reallocations for programmatic alignment.
Core Reallocation	828	5054	EE	0.00	0	745,671	0	0	745,671	CORE reallocations for programmatic alignment.
Core Reallocation	828	5055	EE	0.00	0	37,265	0	0	37,265	CORE reallocations for programmatic alignment.
Core Reallocation	828	5715	PD	0.00	0	98,684	0	0	98,684	CORE reallocations for programmatic alignment.

CORE RECONCILIATION DETAIL

**DEPARTMENT OF HEALTH & SENIOR SERVICES
HIV STD AND HEPATITIS SERVICES**

5. CORE RECONCILIATION DETAIL

				Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS										
Core Reallocation	828	5714	PD		0.00	57,500	0	0	57,500	CORE reallocations for programmatic alignment.
Core Reallocation	828	5055	PD		0.00	0	5,821,089	0	5,821,089	CORE reallocations for programmatic alignment.
Core Reallocation	828	5054	PD		0.00	0	66,125	0	66,125	CORE reallocations for programmatic alignment.
NET DEPARTMENT CHANGES					28.11	149,782	8,349,668	10,309	8,509,759	
DEPARTMENT CORE REQUEST										
			PS		47.50	737,593	1,985,552	0	2,723,145	
			EE		0.00	1,404,834	22,165,482	10,309	23,580,625	
			PD		0.00	5,267,783	77,477,639	0	82,745,422	
			Total		47.50	7,410,210	101,628,673	10,309	109,049,192	
GOVERNOR'S RECOMMENDED CORE										
			PS		47.50	737,593	1,985,552	0	2,723,145	
			EE		0.00	1,404,834	22,165,482	10,309	23,580,625	
			PD		0.00	5,267,783	77,477,639	0	82,745,422	
			Total		47.50	7,410,210	101,628,673	10,309	109,049,192	

DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HIV STD AND HEPATITIS SERVICES									
CORE									
PERSONAL SERVICES									
GENERAL REVENUE	575,285	11.65	645,311	12.93	737,593	14.33	737,593	14.33	
DHSS-FEDERAL AND OTHER FUNDS	370,360	6.03	404,718	6.46	1,985,552	33.17	1,985,552	33.17	
TOTAL - PS	945,645	17.68	1,050,029	19.39	2,723,145	47.50	2,723,145	47.50	
EXPENSE & EQUIPMENT									
GENERAL REVENUE	0	0.00	1,404,834	0.00	1,404,834	0.00	1,404,834	0.00	
DHSS-FEDERAL AND OTHER FUNDS	42,504	0.00	21,382,546	0.00	22,165,482	0.00	22,165,482	0.00	
HEALTH INITIATIVES	0	0.00	0	0.00	10,309	0.00	10,309	0.00	
TOTAL - EE	42,504	0.00	22,787,380	0.00	23,580,625	0.00	23,580,625	0.00	
PROGRAM-SPECIFIC									
GENERAL REVENUE	5,550,302	0.00	5,210,283	0.00	5,267,783	0.00	5,267,783	0.00	
DHSS-FEDERAL AND OTHER FUNDS	27,915,178	0.00	71,491,741	0.00	77,477,639	0.00	77,477,639	0.00	
TOTAL - PD	33,465,480	0.00	76,702,024	0.00	82,745,422	0.00	82,745,422	0.00	
TOTAL	34,453,629	17.68	100,539,433	19.39	109,049,192	47.50	109,049,192	47.50	
Pay Plan - 0000012									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	74,189	0.00	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	0	0.00	12,951	0.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	87,140	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	87,140	0.00	
Disease Intervention Specialis - 1580001									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	165,129	3.00	0	0.00	
TOTAL - PS	0	0.00	0	0.00	165,129	3.00	0	0.00	
EXPENSE & EQUIPMENT									
GENERAL REVENUE	0	0.00	0	0.00	31,227	0.00	0	0.00	
TOTAL - EE	0	0.00	0	0.00	31,227	0.00	0	0.00	
TOTAL	0	0.00	0	0.00	196,356	3.00	0	0.00	

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DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HIV STD AND HEPATITIS SERVICES									
Hepatitis C Virus (HCV) Testin - 1580007									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	53,781	1.00	0	0.00	
TOTAL - PS	0	0.00	0	0.00	53,781	1.00	0	0.00	
EXPENSE & EQUIPMENT									
GENERAL REVENUE	0	0.00	0	0.00	243,713	0.00	0	0.00	
OPIOID TREATMENT AND RECOVERY	0	0.00	0	0.00	0	0.00	239,038	0.00	
TOTAL - EE	0	0.00	0	0.00	243,713	0.00	239,038	0.00	
TOTAL	0	0.00	0	0.00	297,494	1.00	239,038	0.00	
Rapid HCV Testing - 1580035									
EXPENSE & EQUIPMENT									
OPIOID TREATMENT AND RECOVERY	0	0.00	0	0.00	0	0.00	288,750	0.00	
TOTAL - EE	0	0.00	0	0.00	0	0.00	288,750	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	288,750	0.00	
GRAND TOTAL	\$34,453,629	17.68	\$100,539,433	19.39	\$109,543,042	51.50	\$109,664,120	47.50	

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58586C BUDGET UNIT NAME: HIV, STI, and Hepatitis Services HOUSE BILL SECTION: 10.740	DEPARTMENT: Department of Health and Senior Services (DHSS) DIVISION: Division of Community and Public Health (DCPH)
1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.	
DEPARTMENT REQUEST	
DHSS has worked to create and breakdown CORES within DCPH in order to align the budget structure with the division's operations. The Department requests fifty percent (50%) flexibility between House Bills 10.700, 10.705, 10.710, 10.715, 10.720, 10.725, 10.730, 10.735, 10.740, 10.745, 10.750, 10.755, 10.760, 10.765, 10.770, and 10.775 in order to ensure continuity of operations during the transition.	
2. Estimate how much flexibility will be used for the budget year. How much flexibility was used in the Prior Year Budget and the Current Year Budget? Please specify the amount.	
PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT YEAR ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
Not applicable.	Not applicable.
BUDGET REQUEST ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED	
Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of Governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The Department's requested flex will allow the Department to utilize available resources in the most effective manner as the need arises. Flexibility (50%) between House bill sections will allow for continuity of operations as DCPH continues to align budget structure with its operating structure. The Department cannot predict how much flexibility will be utilized.	
3. Please explain how flexibility was used in the prior and/or current years.	
PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
Not applicable.	Not applicable.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HIV STD AND HEPATITIS SERVICES								
CORE								
SPECIAL ASST PROFESSIONAL	0	0.00	0	0.00	87,500	1.25	87,500	1.25
ADMINISTRATIVE SUPPORT CLERK	0	0.00	0	0.00	31,041	0.39	31,041	0.39
ADMIN SUPPORT ASSISTANT	34,750	1.06	36,730	1.15	50,463	1.52	50,463	1.52
LEAD ADMIN SUPPORT ASSISTANT	26,317	0.70	29,932	0.85	45,748	1.16	45,748	1.16
ADMIN SUPPORT PROFESSIONAL	72,382	1.61	79,696	1.75	104,220	2.29	104,220	2.29
CUSTOMER SERVICE REP	66	0.00	0	0.00	0	0.00	0	0.00
PROGRAM ASSISTANT	0	0.00	5,997	0.15	0	0.00	0	0.00
SENIOR PROGRAM SPECIALIST	51,426	0.90	56,428	1.00	82,144	1.30	82,144	1.30
ASSOC RESEARCH/DATA ANALYST	208	0.00	0	0.00	0	0.00	0	0.00
RESEARCH/DATA ANALYST	20,264	0.40	27,453	0.53	30,749	0.59	30,749	0.59
RESEARCH DATA ANALYSIS SPV/MGR	10,179	0.15	10,158	0.15	0	0.00	0	0.00
PUBLIC RELATIONS COORDINATOR	80	0.00	0	0.00	0	0.00	0	0.00
LICENSED CLINICAL SOCIAL WKR	52,599	0.89	48,454	0.72	60,799	1.00	60,799	1.00
CLINICAL SOCIAL WORK SPV/SPEC	54,013	0.89	49,757	0.72	62,433	1.02	62,433	1.02
ENVIRONMENTAL PROGRAM ASST	44	0.00	0	0.00	0	0.00	0	0.00
ENVIRONMENTAL PROGRAM SPV	310	0.00	0	0.00	0	0.00	0	0.00
ACCOUNTS ASSISTANT	6	0.00	0	0.00	0	0.00	0	0.00
ASSOCIATE EPIDEMIOLOGIST	62,618	1.26	69,917	1.40	413,864	7.72	413,864	7.72
EPIDEMIOLOGIST	51,680	0.90	58,822	1.05	261,560	4.20	261,560	4.20
PUBLIC HEALTH ENV SUPERVISOR	212	0.00	0	0.00	0	0.00	0	0.00
PUBLIC HEALTH PROGRAM ASSOC	96,397	2.11	111,769	2.15	265,825	4.82	265,825	4.82
PUBLIC HEALTH PROGRAM SPEC	114,094	2.30	114,293	2.35	473,446	9.13	473,446	9.13
SR PUBLIC HEALTH PROGRAM SPEC	64,889	1.12	88,338	1.60	220,875	3.58	220,875	3.58
PUBLIC HEALTH PROGRAM SPV	128,932	1.99	129,267	2.02	296,867	4.43	296,867	4.43
PUBLIC HEALTH PROGRAM MANAGER	104,049	1.40	133,018	1.80	235,611	3.10	235,611	3.10
SENIOR REGULATORY AUDITOR	130	0.00	0	0.00	0	0.00	0	0.00
TOTAL - PS	945,645	17.68	1,050,029	19.39	2,723,145	47.50	2,723,145	47.50
TRAVEL, IN-STATE	9,010	0.00	14,070	0.00	105,196	0.00	105,196	0.00
TRAVEL, OUT-OF-STATE	7,004	0.00	0	0.00	51,434	0.00	51,434	0.00
SUPPLIES	7,209	0.00	22,999	0.00	305,536	0.00	305,536	0.00
PROFESSIONAL DEVELOPMENT	6,186	0.00	0	0.00	69,092	0.00	69,092	0.00
COMMUNICATION SERV & SUPP	2,577	0.00	0	0.00	16,795	0.00	16,795	0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HIV STD AND HEPATITIS SERVICES								
CORE								
PROFESSIONAL SERVICES	5,518	0.00	22,750,311	0.00	23,000,527	0.00	23,000,527	0.00
M&R SERVICES	0	0.00	0	0.00	5,548	0.00	5,548	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	899	0.00	899	0.00
OTHER EQUIPMENT	0	0.00	0	0.00	11,256	0.00	11,256	0.00
BUILDING LEASE PAYMENTS	0	0.00	0	0.00	3,295	0.00	3,295	0.00
MISCELLANEOUS EXPENSES	5,000	0.00	0	0.00	11,047	0.00	11,047	0.00
TOTAL - EE	42,504	0.00	22,787,380	0.00	23,580,625	0.00	23,580,625	0.00
PROGRAM DISTRIBUTIONS	33,465,480	0.00	76,702,024	0.00	82,745,422	0.00	82,745,422	0.00
TOTAL - PD	33,465,480	0.00	76,702,024	0.00	82,745,422	0.00	82,745,422	0.00
GRAND TOTAL	\$34,453,629	17.68	\$100,539,433	19.39	\$109,049,192	47.50	\$109,049,192	47.50
GENERAL REVENUE	\$6,125,587	11.65	\$7,260,428	12.93	\$7,410,210	14.33	\$7,410,210	14.33
FEDERAL FUNDS	\$28,328,042	6.03	\$93,279,005	6.46	\$101,628,673	33.17	\$101,628,673	33.17
OTHER FUNDS	\$0	0.00	\$0	0.00	\$10,309	0.00	\$10,309	0.00

PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.740</u>
HIV, STI, and Hepatitis Services	
Program is found in the following core budget(s): HIV, STI, and Hepatitis Services	
1a. What strategic priority does this program address? Build and Strengthen Partnerships, Use Clear and Consistent Communication to Build Trust, Expand Access to Services, Include Diversity and Inclusion in All Practices.	
1b. What does this program do? This program provides HIV, sexually transmitted infection (STI), and viral hepatitis education to the general public, those at risk for infection, and clinical providers; access to HIV, STI, and viral hepatitis prevention and testing services; increased access to HIV, STI, and viral hepatitis care and treatment; and a coordinated and efficient use of limited HIV, STI, and viral hepatitis resources to protect health and keep people safe. These outcomes are achieved through the following activities: <ul style="list-style-type: none"> • Educating Missourians regarding HIV, STI, and hepatitis prevention, education, testing, and linkage to care services to stop the spread of infection, prevent re-infection, and prevent poor health outcomes. • Providing screening and testing resources for specific, disproportionately affected populations who are underinsured or uninsured. Priority populations vary by condition and are based on epidemiological data and grant priorities. • Delivering services in collaboration with local public health agencies, as well as a network of prevention contractors and testing program partner sites to ensure access to services throughout the state. • Providing disease information, risk reduction counseling, and partner services (including elicitation of sex/needle-sharing partners and confidential notification of exposed partners to offer counseling, testing, and referral for treatment and care). • Providing access to HIV medical care, medication, and related services for low-income Missourians living with HIV to improve individual health outcomes as well, as to reduce HIV transmission rates. Individuals living with HIV for whom the virus is well controlled by HIV medications pose essentially no risk of transmitting the virus through sexual contact. • Facilitating the coordination and collaboration among statewide HIV, STI, and hepatitis service providers and stakeholders to determine program priorities and ensure efficient use of limited resources based on historical epidemiological data and emerging trends. 	

PROGRAM DESCRIPTION

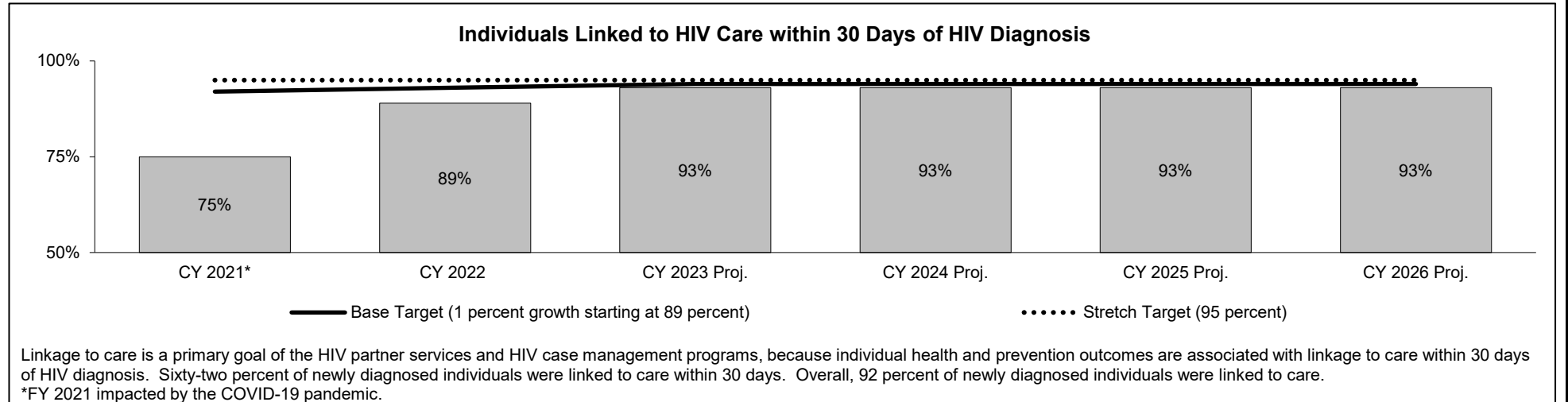
Health and Senior Services	HB Section(s): <u>10.740</u>
HIV, STI, and Hepatitis Services	
Program is found in the following core budget(s): HIV, STI, and Hepatitis Services	

2a. Provide an activity measure(s) for the program.

HIV, STI, and Hepatitis Clients Served						
Program/Service	CY 2021	CY 2022	CY 2023	CY 2024 Proj.	CY 2025 Proj.	CY 2026 Proj.
HIV Care Program Clients Served	8,567	8,614	8,535	8,650	8,650	8,700
HIV Tests	47,305	61,961	60,185	85,000	85,000	90,000
Hepatitis C Rapid Tests ***	2,088	2,583	4,175	4,000	4,500	4,500
Gonorrhea/Chlamydia Tests	40,036	44,732	50,712	55,000	55,000	55,000
Syphilis Tests	22,102	21,935	24,822	30,000	30,000	30,000
Individuals Receiving Partner Services**	2,443	3,900	3,900	4,000	4,000	4,000
Condoms Distributed	368,373	507,179	798,668	700,000	700,000	70,000
STI Medications Distributed*	57,147	55,283	56,909	74,000	74,000	74,000

*Medications for the treatment of Gonorrhea, Chlamydia, or Syphilis infection; units represent one pill, vial, or shot.
 **The methodology for this measure will be reviewed over the next year to determine if there is possible underreporting.
 *** The Viral Hepatitis program had additional grant funding that they put toward rapid HCV testing for CY23. There is no guarantee that this funding will be available for that future years.

2b. Provide a measure(s) of the program's quality.



PROGRAM DESCRIPTION

Health and Senior Services

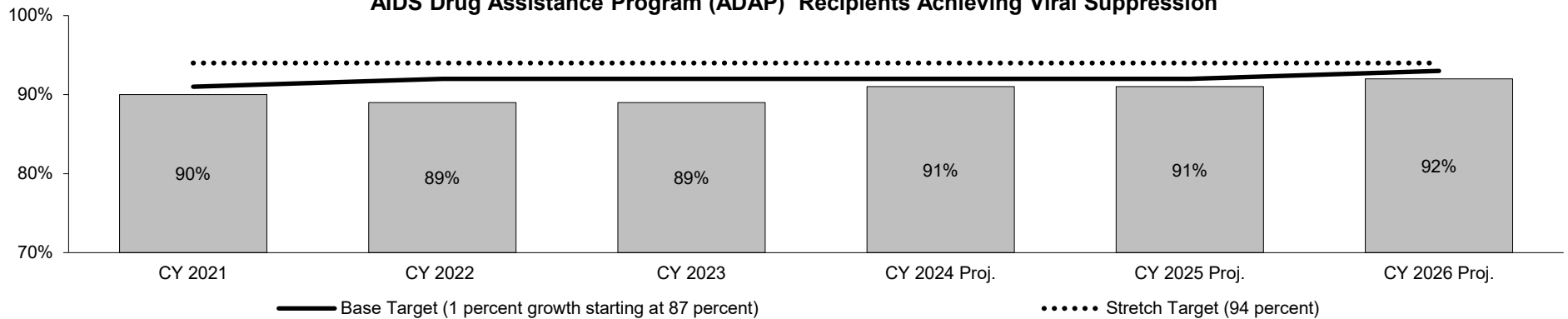
HB Section(s): 10.740

HIV, STI, and Hepatitis Services

Program is found in the following core budget(s): HIV, STI, and Hepatitis Services

2b. Provide a measure(s) of the program's quality. (continued)

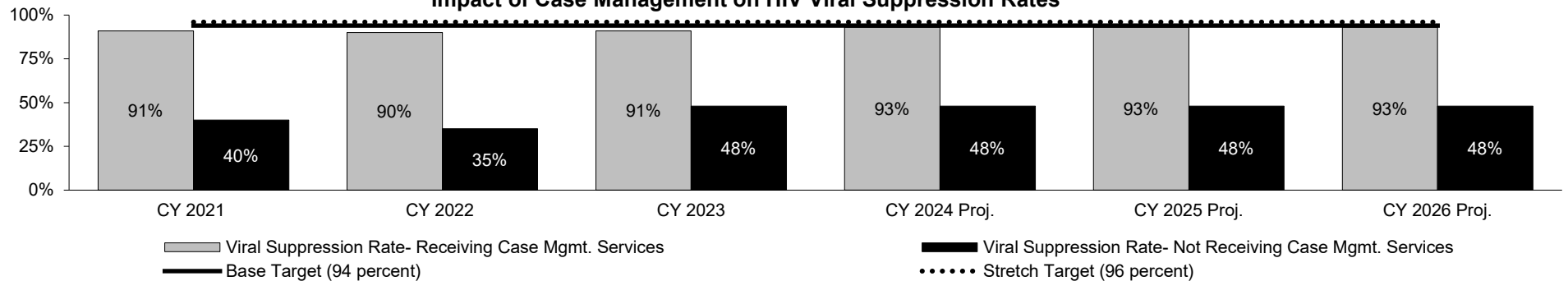
AIDS Drug Assistance Program (ADAP) Recipients Achieving Viral Suppression



Viral suppression is an important clinical marker used to monitor HIV disease progression and response to antiretroviral treatment. According to CDC, getting and keeping an undetectable viral load is the best thing people with HIV can do to stay healthy. Another benefit of reducing the amount of virus in the body is that it helps prevent transmission to others through sex or syringe sharing, and from mother to child during pregnancy, birth, and breastfeeding.

2c. Provide a measure(s) of the program's impact.

Impact of Case Management on HIV Viral Suppression Rates



Viral suppression is an important clinical marker used to monitor HIV disease progression and response to antiretroviral treatment. Individuals living with HIV who maintain viral suppression stay healthier, live longer, and have effectively no risk of transmitting the virus to an HIV-negative partner through sexual contact. Case management services significantly increase viral suppression rates among Missourians living with HIV.

PROGRAM DESCRIPTION

Health and Senior Services

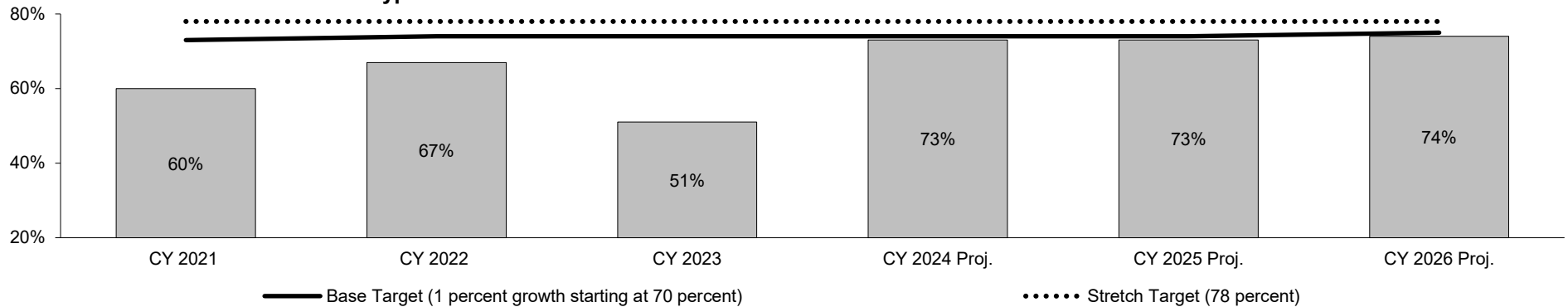
HB Section(s): 10.740

HIV, STI, and Hepatitis Services

Program is found in the following core budget(s): HIV, STI, and Hepatitis Services

2c. Provide a measure(s) of the program's impact. (continued)

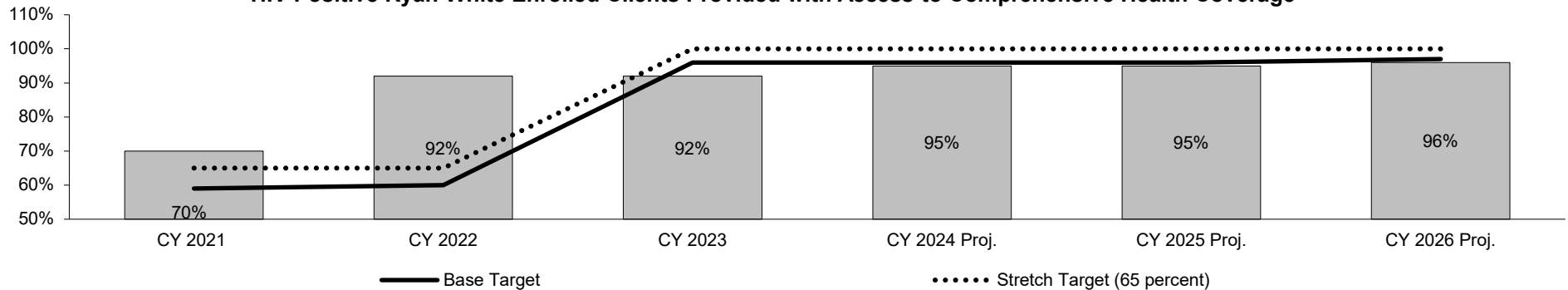
Syphilis Treatment Received as a Result of Partner Services Intervention



This indicator shows the percentage of people infected with or exposed to syphilis who received treatment as a direct result of disease intervention activities by the Department. Connecting individuals to treatment helps control the infection in the community and prevents further damage to the individual's health.

*This performance measure was impacted by the COVID-19 pandemic.

HIV Positive Ryan White Enrolled Clients Provided with Access to Comprehensive Health Coverage



By providing access to comprehensive health coverage (private insurance) and assisting individuals with applying for Medicaid, Missouri's Ryan White program is able to ensure that people living with HIV have access to a full range of essential health benefits at a cumulative cost savings to the Ryan White program. Comprehensive health coverage provides access to health services that are not available to uninsured Ryan White clients including inpatient care, emergency department care, and management of some chronic or co-occurring conditions.

PROGRAM DESCRIPTION

Health and Senior Services

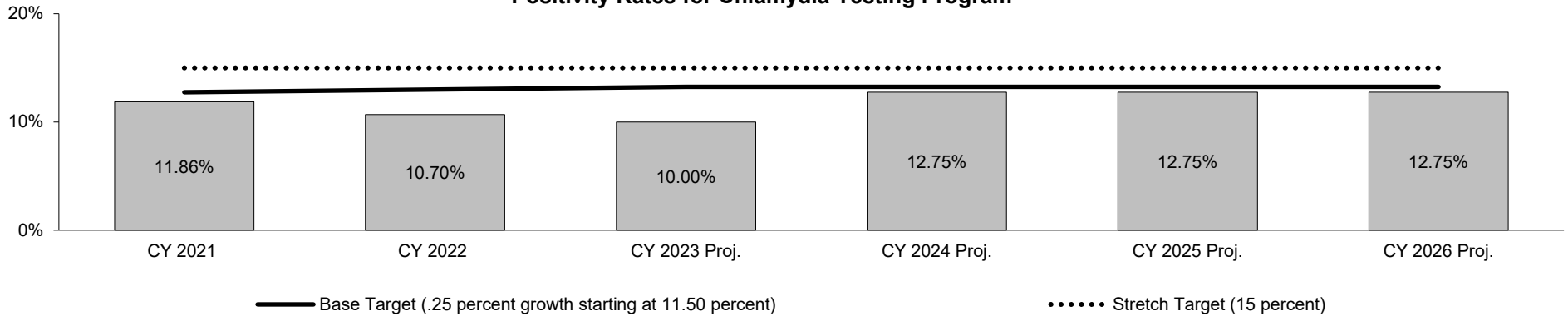
HB Section(s): 10.740

HIV, STI, and Hepatitis Services

Program is found in the following core budget(s): HIV, STI, and Hepatitis Services

2d. Provide a measure(s) of the program's efficiency.

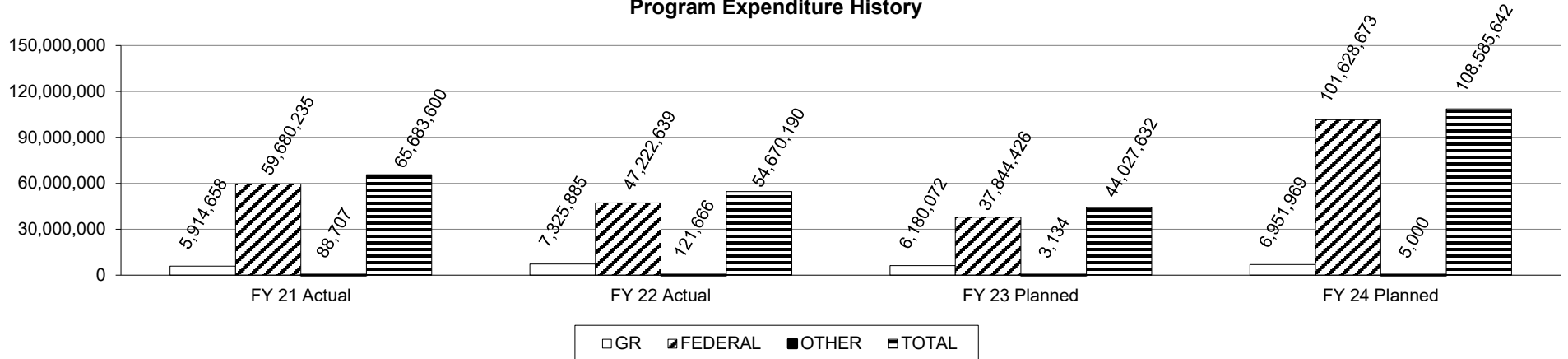
Positivity Rates for Chlamydia Testing Program



Chlamydia testing focuses on those who are most at-risk for infection, including those with no signs or symptoms. High testing positivity rates indicate that the testing program is effectively targeted to those individuals who are most at risk for infection rather than using limited resources to test individuals with low or no risk of infection. Prior CDC cooperative agreements recommended a testing program positivity rate of three percent. Missouri's testing program currently exceeds this target, and continues to work to identify individuals and populations who are at increased risk for infection.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)

Program Expenditure History



PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.740</u>
HIV, STI, and Hepatitis Services	
Program is found in the following core budget(s): HIV, STI, and Hepatitis Services	
4. What are the sources of the "Other " funds? Health Initiatives (0275).	
5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.) Sections 191.653, 191.656, and 191.677, RSMo; Public Law 111-87 (Ryan White HIV/AIDS Treatment Extension Act of 2009); and Acquired Immune Deficiency Syndrome (AIDS) Housing Opportunity Act, 42 USC Section 12901.	
6. Are there federal matching requirements? If yes, please explain. Yes, the Ryan White grant requires a one dollar state match for every two dollars of Ryan White Part B Base and ADAP funding. No match is required for Ryan White Supplemental or other sources of funding for the HIV, STI, and Hepatitis Program.	
7. Is this a federally mandated program? If yes, please explain. No.	

NEW DECISION ITEM

Health and Senior Services					Budget Unit 58586C, 58025C				
Division of Community and Public Health									
Disease Intervention Specialist Positions DI#1580001					HB Section 10.740, 10.605				

1. AMOUNT OF REQUEST

	FY 2025 Budget Request			
	GR	Federal	Other	Total
PS	165,129	0	0	165,129
EE	87,518	0	0	87,518
PSD	0	0	0	0
TRF	0	0	0	0
Total	252,647	0	0	252,647

FTE	3.00	0.00	0.00	3.00
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Est. Fringe	106,601	0	0	106,601
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Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

	FY 2025 Governor's Recommendation			
	GR	Federal	Other	Total
PS	0	0	0	0
EE	0	0	0	0
PSD	0	0	0	0
TRF	0	0	0	0
Total	0	0	0	0

FTE	0.00	0.00	0.00	0.00
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Est. Fringe	0	0	0	0
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Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

2. THIS REQUEST CAN BE CATEGORIZED AS:

<input type="checkbox"/> New Legislation	<input type="checkbox"/> New Program	<input type="checkbox"/> Fund Switch
<input type="checkbox"/> Federal Mandate	<input checked="" type="checkbox"/> Program Expansion	<input type="checkbox"/> Cost to Continue
<input type="checkbox"/> GR Pick-Up	<input type="checkbox"/> Space Request	<input type="checkbox"/> Equipment Replacement
<input type="checkbox"/> Pay Plan	<input type="checkbox"/> Other: _____	

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

This request is for 3.00 FTE for Associate Epidemiologists positions. Disease Intervention Specialists (DIS) are critical public health professionals working to stop the spread of infections that threaten communities throughout Missouri. Disease Intervention Specialists are crucial as they are trained professionals, informed about the cause and spread of STDs or HIV, skilled in taking sexual histories, identifying and locating people who may have been exposed, and referring people for testing and treatment. While expanding DIS capacity by contracting with local public health agencies, the number of DIS staff continues to be insufficient to meet the needs for the amount of work needing to be conducted throughout the state of Missouri. From 2015 to 2022, the number of cases assigned to DIS staff for Syphilis and HIV increased by approximately 272 percent. There were 6,846 cases assigned to DIS staff in 2022. The FTE will be placed in Kanas City and St. Louis areas, where cases remain extremely high. These FTE will ensure a more timely and adequate response to individuals newly diagnosed with HIV and STIs.

NEW DECISION ITEM

Health and Senior Services			Budget Unit		58586C, 58025C				
Division of Community and Public Health			HB Section		10.740, 10.605				
Disease Intervention Specialist Positions			DI#1580001						
4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)									
The FTE request were based on the assumption that the positions would allow DIS to have a greater impact on disease transmission. The 1.00 FTE will be located in Kansas City and 2.00 FTE in the St. Louis, areas with extremely high cases. In 2015, there was one DIS for every 95 Syphilis and HIV cases; in 2022, there was one DIS for every 353 Syphilis and HIV cases. There are 1,221 open cases in 2023, meaning a case load of 102 cases per DIS staff member. This is more than double the recommended amount per the National Coalition of STD Directors (NCSD).									
5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.									
	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req
	GR	GR	FED	FED	OTHER	OTHER	TOTAL	TOTAL	One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Associate Epidemiologist (19ED10)	165,129	3.00	0	0.00	0	0.00	165,129	3.00	0
Total PS	165,129	3.00	0	0.00	0	0.00	165,129	3.00	0
Travel (140)	20,040		0		0		20,040		0
Supplies (190)	13,374		0		0		13,374		0
Communication Services (340)	20,983		0		0		20,983		1,112
Professional Services (400)	15,817		0		0		15,817		0
M&R Services (430)	4,521		0		0		4,521		0
Computer Equipment (480)	5,673		0		0		5,673		5,673
Office Equipment (580)	7,110		0		0		7,110		7,110
Total EE	87,518		0		0		87,518		13,895
Grand Total	252,647	3.00	0	0.00	0	0.00	252,647	3.00	13,895

NEW DECISION ITEM

Health and Senior Services			Budget Unit		58586C, 58025C				
Division of Community and Public Health			HB Section		10.740, 10.605				
Disease Intervention Specialist Positions			DI#1580001						
Budget Object Class/Job Class	Gov Rec GR DOLLARS	Gov Rec GR FTE	Gov Rec FED DOLLARS	Gov Rec FED FTE	Gov Rec OTHER DOLLARS	Gov Rec OTHER FTE	Gov Rec TOTAL DOLLARS	Gov Rec TOTAL FTE	Gov Rec One-Time DOLLARS
Associate Epidemiologist (19ED10)	0	0.00	0	0.00	0	0.00	0	0.00	0
Total PS	0	0.00	0	0.00	0	0.00	0	0.00	0
Travel (140)	0		0		0		0		0
Supplies (190)	0		0		0		0		0
Communication Services (340)	0		0		0		0		0
Professional Services (400)	0		0		0		0		0
M&R Services (430)	0		0		0		0		0
Computer Equipment (480)	0		0		0		0		0
Office Equipment (580)	0		0		0		0		0
Total EE	0		0		0		0		0
Grand Total	0	0.00	0	0.00	0	0.00	0	0.00	0

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

6a. Provide an activity measure for the program.

The activity measure for this program will be the number of cases of Syphilis worked and closed by DIS.

6b. Provide a measure(s) of the program's quality.

The program's quality measure will be the percentage of people diagnosed with Syphilis successfully linked to appropriate medical treatment.

6c. Provide a measure of the program's impact.

The program's impact will be measured by the average number partners located and tested for each newly identified case of Syphilis.

6d. Provide a measure of the program's efficiency.

The measure of the program's efficiency will be the number people newly diagnosed with HIV or Syphilis located and linked to care or treatment within 30 days.

7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:

The Department will utilize trainings provided by the Centers for Disease Control and other subject matter experts to locate persons newly diagnosed with HIV or Syphilis. Interviews with the person will be conducted to identify likely transmission route and identify others that may have been exposed. The Department will work to located all partners identified and provide testing and education as well as ensure that original patient is provided appropriate treatment to cure the Syphilis infection or is linked to HIV medical care.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HIV STD AND HEPATITIS SERVICES								
Disease Intervention Specialis - 1580001								
ASSOCIATE EPIDEMIOLOGIST	0	0.00	0	0.00	165,129	3.00	0	0.00
TOTAL - PS	0	0.00	0	0.00	165,129	3.00	0	0.00
TRAVEL, IN-STATE	0	0.00	0	0.00	15,818	0.00	0	0.00
SUPPLIES	0	0.00	0	0.00	1,384	0.00	0	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	1,112	0.00	0	0.00
M&R SERVICES	0	0.00	0	0.00	130	0.00	0	0.00
COMPUTER EQUIPMENT	0	0.00	0	0.00	5,673	0.00	0	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	7,110	0.00	0	0.00
TOTAL - EE	0	0.00	0	0.00	31,227	0.00	0	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$196,356	3.00	\$0	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$196,356	3.00		0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00		0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00		0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
DIVISION OF ADMINISTRATION								
Disease Intervention Specialis - 1580001								
TRAVEL, IN-STATE	0	0.00	0	0.00	4,222	0.00	0	0.00
SUPPLIES	0	0.00	0	0.00	11,990	0.00	0	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	19,871	0.00	0	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	15,817	0.00	0	0.00
M&R SERVICES	0	0.00	0	0.00	4,391	0.00	0	0.00
TOTAL - EE	0	0.00	0	0.00	56,291	0.00	0	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$56,291	0.00	\$0	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$56,291	0.00		0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00		0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00		0.00

NEW DECISION ITEM

Health and Senior Services					Budget Unit 58586C, 58025C				
Division of Community and Public Health									
Hepatitis C Virus (HCV) Testing Support Services DI# 1580007					HB Section 10.740, 10.605				
1. AMOUNT OF REQUEST									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	53,781	0	0	53,781	PS	0	0	53,781	53,781
EE	262,046	0	0	262,046	EE	0	0	262,046	262,046
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	315,827	0	0	315,827	Total	0	0	315,827	315,827
FTE	1.00	0.00	0.00	1.00	FTE	0.00	0.00	1.00	1.00
Est. Fringe	35,063	0	0	35,063	Est. Fringe	0	0	35,063	35,063
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes</i>				
Other Funds: Opioid Treatment and Recovery (0705).									
2. THIS REQUEST CAN BE CATEGORIZED AS:									
<input type="checkbox"/> New Legislation		<input checked="" type="checkbox"/> New Program		<input type="checkbox"/> Fund Switch					
<input type="checkbox"/> Federal Mandate		<input type="checkbox"/> Program Expansion		<input type="checkbox"/> Cost to Continue					
<input type="checkbox"/> GR Pick-Up		<input type="checkbox"/> Space Request		<input type="checkbox"/> Equipment Replacement					
<input type="checkbox"/> Pay Plan		<input type="checkbox"/> Other: _____							

NEW DECISION ITEM

Health and Senior Services <hr/> Division of Community and Public Health <hr/> Hepatitis C Virus (HCV) Testing Support Services DI# 1580007	Budget Unit 58586C, 58025C <hr/> HB Section 10.740, 10.605 <hr/>
3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.	
<p>This funding request is to increase access to Hepatitis C virus (HCV) antibody screening and confirmatory testing for under and uninsured individuals. Hepatitis C is curable, with a cure rate of over 95 percent, and reduces the risk of cirrhosis and liver cancer as well as prevents transmission to others. The cost to treat one person with Hepatitis C is approximately \$24,000, compared to the costs of a liver transplant for approximately \$878,400.</p> <p>This will expand the State Public Health Lab's ability to process testing for HCV. Testing for HCV is currently provided through viral hepatitis supplemental funding from the Centers for Disease Control. This funding will end in April, 2024. Missouri's Hepatitis C Elimination Plan goal is to increase access to Hepatitis C prevention, testing, and treatment for all Missourians. Expanding access to antibody screening and confirmatory testing aligns not only with the Hepatitis C Elimination Plan but with MO HealthNet's Project Hep Cure, which makes MAVYRET®, an HCV medication, available to MO HealthNet participants. Medication availability and increased access to testing can help Missouri eliminate HCV.</p> <p>The Department currently provides rapid point-of-care testing for HCV antibodies. This has increased access to screenings, but these point-of-care tests must be confirmed by lab testing.</p> <p>This action is not affiliated with the Missouri Department of Correction's expanded efforts on Hepatitis C treatment and testing.</p>	
4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)	
<p>The funding will be spent on the following:</p> <ul style="list-style-type: none"> • HCV testing kits, controls, and consumables for testing approximately 15,000 serum/plasma samples on the DiaSorin Liaison XL platform. Approximately \$127,950. • Supplies for collection kits for 15,000 samples. Some kit components are reusable. Approximately \$22,500. • APTIMA HCV assay for confirmatory purposes. Cost is configured per reportable test based on 1,500 samples. Approximately \$71,626. • This funding will support the courier transportation of samples to the State Public Health Laboratory and the laboratory information management system, for a cost of approximately \$10,000. • 1.00 FTE with a salary of \$53,781, along with \$23,008 for operations, network, expenses and equipment, is requested for a Laboratory Scientist to supplement existing staff at the State Public Health Lab. 	

NEW DECISION ITEM

Health and Senior Services			Budget Unit 58586C, 58025C						
Division of Community and Public Health									
Hepatitis C Virus (HCV) Testing Support Services			DI# 1580007	HB Section 10.740, 10.605					
5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.									
	Dept Req GR	Dept Req GR	Dept Req FED	Dept Req FED	Dept Req OTHER	Dept Req OTHER	Dept Req TOTAL	Dept Req TOTAL	Dept Req One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Laboratory Scientist (19BLB50)	53,781	1.00	0	0.00	0	0.00	53,781	1.00	0
Total PS	53,781	1.00	0	0.00	0	0.00	53,781	1.00	0
Travel (140)	1,375		0		0		1,375		0
Supplies (190)	242,943		0		0		242,943		0
Communication Services (340)	6,843		0		0		6,843		0
Professional Services (400)	5,151		0		0		5,151		0
M&R Services (430)	1,473		0		0		1,473		0
Computer Equipment (480)	1,891		0		0		1,891		1,891
Office Equipment (580)	2,370		0		0		2,370		2,370
Total EE	262,046		0		0		262,046		4,261
Grand Total	315,827	1.00	0	0.00	0	0.00	315,827	1.00	4,261
	Gov Rec GR	Gov Rec GR	Gov Rec FED	Gov Rec FED	Gov Rec OTHER	Gov Rec OTHER	Gov Rec TOTAL	Gov Rec TOTAL	Gov Rec One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Laboratory Scientist (19BLB50)	0	0.00	0	0.00	53,781	1.00	53,781	1.00	0
Total PS	0	0.00	0	0.00	53,781	1.00	53,781	1.00	0
Travel (140)	0		0		1,375		1,375		
Supplies (190)	0		0		242,943		242,943		
Communication Services (340)	0		0		6,843		6,843		
Professional Services (400)	0		0		5,151		5,151		
M&R Services (430)	0		0		1,473		1,473		
Computer Equipment (480)	0		0		1,891		1,891		1,891
Office Equipment (580)	0		0		2,370		2,370		2,370
Total EE	0		0		262,046		262,046		4,261
Grand Total	0	0.00	0	0.00	315,827	1.00	315,827	1.00	4,261

NEW DECISION ITEM

Health and Senior Services	Budget Unit 58586C, 58025C
Division of Community and Public Health	
Hepatitis C Virus (HCV) Testing Support Services DI# 1580007	HB Section 10.740, 10.605
6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)	
6a. Provide an activity measure(s) for the program. An activity measure for this program would be the number of HCV specimens tested.	
6b. Provide a measure(s) of the program's quality. A measure of the program's quality would be the number of sites submitting HCV specimens in calendar year.	
6c. Provide a measure(s) of the program's impact. The program's impact can be measured by the number of people receiving a positive HCV test result.	
6d. Provide a measure(s) of the program's efficiency. Program efficiency can be measured as a percentage of specimens with a HCV positive result.	
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:	
All local public health agencies that submit specimens of any type to the Missouri State Public Health Lab will be able to submit HCV specimens at no charge.	

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HIV STD AND HEPATITIS SERVICES								
Hepatitis C Virus (HCV) Testin - 1580007								
LABORATORY SCIENTIST	0	0.00	0	0.00	53,781	1.00	0	0.00
TOTAL - PS	0	0.00	0	0.00	53,781	1.00	0	0.00
SUPPLIES	0	0.00	0	0.00	239,038	0.00	239,038	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	371	0.00	0	0.00
M&R SERVICES	0	0.00	0	0.00	43	0.00	0	0.00
COMPUTER EQUIPMENT	0	0.00	0	0.00	1,891	0.00	0	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	2,370	0.00	0	0.00
TOTAL - EE	0	0.00	0	0.00	243,713	0.00	239,038	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$297,494	1.00	\$239,038	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$297,494	1.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$239,038	0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
STATE PUBLIC HEALTH LAB								
Hepatitis C Virus (HCV) Testin - 1580007								
LABORATORY SCIENTIST	0	0.00	0	0.00	0	0.00	53,781	1.00
TOTAL - PS	0	0.00	0	0.00	0	0.00	53,781	1.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	0	0.00	371	0.00
M&R SERVICES	0	0.00	0	0.00	0	0.00	43	0.00
COMPUTER EQUIPMENT	0	0.00	0	0.00	0	0.00	1,891	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	0	0.00	2,370	0.00
TOTAL - EE	0	0.00	0	0.00	0	0.00	4,675	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$58,456	1.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$58,456	1.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
DIVISION OF ADMINISTRATION								
Hepatitis C Virus (HCV) Testin - 1580007								
TRAVEL, IN-STATE	0	0.00	0	0.00	1,375	0.00	1,375	0.00
SUPPLIES	0	0.00	0	0.00	3,905	0.00	3,905	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	6,472	0.00	6,472	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	5,151	0.00	5,151	0.00
M&R SERVICES	0	0.00	0	0.00	1,430	0.00	1,430	0.00
TOTAL - EE	0	0.00	0	0.00	18,333	0.00	18,333	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$18,333	0.00	\$18,333	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$18,333	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$18,333	0.00

NEW DECISION ITEM

Department of Health and Senior Services				Budget Unit <u>58586C</u>					
Division of Community and Public Health									
Rapid Hepatitis C Virus (HCV) Testing			DI#	HB Section			<u>10.740</u>		
1. AMOUNT OF REQUEST									
FY 2025 Budget Request				FY 2025 Governor's Recommendation					
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	288,750	288,750
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	Total	<u>0</u>	<u>0</u>	<u>288,750</u>	<u>288,750</u>
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	Est. Fringe	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					
Other Funds: Opioid Treatment and Recovery (0705).									
2. THIS REQUEST CAN BE CATEGORIZED AS:									
<input type="checkbox"/> New Legislation	<input checked="" type="checkbox"/> X	New Program			<input type="checkbox"/>	Fund Switch			
<input type="checkbox"/> Federal Mandate	<input type="checkbox"/>	Program Expansion			<input type="checkbox"/>	Cost to Continue			
<input type="checkbox"/> GR Pick-Up	<input type="checkbox"/>	Space Request			<input type="checkbox"/>	Equipment Replacement			
<input type="checkbox"/> Pay Plan	<input type="checkbox"/>	Other: _____							
3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.									
<p>The Department requests funds to increase access to rapid Hepatitis C Virus (HCV) point-of-care testing statewide. Opioid misuse through injection is a risk factor for several blood-borne conditions, which include Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS), Hepatitis B Virus, and Hepatitis C Virus (HCV). Getting tested and treated can help stop the Hepatitis C virus from triggering cirrhosis or liver cancer and these rapid tests will allow individuals to test at home. As the state continues to address the opioid epidemic, the need for Hepatitis C prevention, testing, and treatment is vital. The current Viral Hepatitis grant has limited funding which primarily supports prevention and surveillance personnel.</p>									

NEW DECISION ITEM

Department of Health and Senior Services				Budget Unit <u>58586C</u>					
Division of Community and Public Health									
Rapid Hepatitis C Virus (HCV) Testing DI#				HB Section <u>10.740</u>					
4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)									
The OraQuick HCV Rapid Antibody Test is the only FDA-approved rapid HCV antibody test on the market. The Department currently has a contract in place for these tests, so funds could be dispersed quickly upon appropriation. Each test costs \$19.25, so this additional funding will provide 15,000 tests to the Department's current STI/HIV testing sites.									
5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.									
Budget Object Class/Job Class	Dept Req GR DOLLARS	Dept Req GR FTE	Dept Req FED DOLLARS	Dept Req FED FTE	Dept Req OTHER DOLLARS	Dept Req OTHER FTE	Dept Req TOTAL DOLLARS	Dept Req TOTAL FTE	Dept Req One-Time DOLLARS
Supplies (190)	<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>
Total EE	<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>
Grand Total	<u>0</u>	<u>0.00</u>	<u>0</u>	<u>0.00</u>	<u>0</u>	<u>0.00</u>	<u>0</u>	<u>0.00</u>	<u>0</u>
Budget Object Class/Job Class	Gov Rec GR DOLLARS	Gov Rec GR FTE	Gov Rec FED DOLLARS	Gov Rec FED FTE	Gov Rec OTHER DOLLARS	Gov Rec OTHER FTE	Gov Rec TOTAL DOLLARS	Gov Rec TOTAL FTE	Gov Rec One-Time DOLLARS
Supplies (190)	<u>0</u>		<u>0</u>		<u>288,750</u>		<u>288,750</u>		<u>0</u>
Total EE	<u>0</u>		<u>0</u>		<u>288,750</u>		<u>288,750</u>		<u>0</u>
Grand Total	<u>0</u>	<u>0.00</u>	<u>0</u>	<u>0.00</u>	<u>288,750</u>	<u>0.00</u>	<u>288,750</u>	<u>0.00</u>	<u>0</u>

NEW DECISION ITEM

Department of Health and Senior Services		Budget Unit	<u>58586C</u>
Division of Community and Public Health			
Rapid Hepatitis C Virus (HCV) Testing	DI#	HB Section	<u>10.740</u>

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

6a. Provide an activity measure(s) for the program.
The program will measure activity through the number of tests conducted

6b. Provide a measure(s) of the program's quality.
The program will measure quality through the percentage of positive test results; this indicates the test are being provided to at-risk populations.

6c. Provide a measure(s) of the program's impact.
The program will measure impact through the number of tests conducted and any increase in individuals seeking care.

6d. Provide a measure(s) of the program's efficiency.
The program will measure efficiency through the expansion of access to antibody screening and aligning with the Hepatitis C Elimination Plan.

7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:
Use existing STI/HIV testing partners to conduct rapid Hepatitis C Testing.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HIV STD AND HEPATITIS SERVICES								
Rapid HCV Testing - 1580035								
SUPPLIES	0	0.00	0	0.00	0	0.00	288,750	0.00
TOTAL - EE	0	0.00	0	0.00	0	0.00	288,750	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$288,750	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$288,750	0.00

CORE DECISION ITEM

Health and Senior Services					Budget Unit 58230C				
Community and Public Health									
Core - Local Public Health Agency Support					HB Section 10.745				
1. CORE FINANCIAL SUMMARY									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	291,807	0	0	291,807	PS	291,807	0	0	291,807
EE	109,400	286	14,573	124,259	EE	109,400	286	14,573	124,259
PSD	9,563,292	9,944,748	0	19,508,040	PSD	9,563,292	9,944,748	0	19,508,040
TRF	0	0	0	0	TRF	0	0	0	0
Total	9,964,499	9,945,034	14,573	19,924,106	Total	9,964,499	9,945,034	14,573	19,924,106
FTE	3.84	0.00	0.00	3.84	FTE	3.84	0.00	0.00	3.84
Est. Fringe	166,429	0	0	166,429	Est. Fringe	166,429	0	0	166,429
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.				
Federal Funds: Department of Health and Senior Services Federal (0143) and Title XXI - Children's Health Insurance Program Federal Fund (0159). Other Funds: Missouri Public Health Services (0298).									

CORE DECISION ITEM

Health and Senior Services	Budget Unit 58230C
Community and Public Health	
Core - Local Public Health Agency Support	HB Section 10.745
2. CORE DESCRIPTION	
<p>The Department of Health and Senior Services (DHSS), Center for Local Public Health administers participation agreements with 115 local health agencies to ensure public health services are available in every county in Missouri. The presence of public health services at the local level is essential for protecting health and keeping people safe. The local health agencies are a vital partner in providing statewide services including, but not limited to, communicable disease surveillance and outbreak response, environmental surveillance (retail food, lodging, on-site sewage, childcare sanitation), immunizations, infectious disease testing and referral to care, chronic disease prevention and control education, public health emergency preparedness and response, and vital record issuance.</p> <p>The funding administered allows local health agencies to utilize funding as needed to deliver public health services in cooperation with DHSS. While the Department is available for technical assistance and may lead activities in some program areas, public health services statewide would not be available without the existence of local public health agencies. State funding constitutes a different percentage of each local health department's total budget, but overall, public health in Missouri remains underfunded and state funding is necessary to maintain local delivery of these services. The federal funding (49 percent of the total in Fiscal Year 2024) distributed through these core participation agreements is the result of federal match received on expenditures reported by locals for specific unreimbursed services they have delivered to children age zero through 19 (Children's Health Insurance Program Health Services Initiative (CHIP H.S.I.)). DHSS staff provide technical assistance regarding CHIP H.S.I. claiming, and collect and aggregate the expenditure data for all 115 agencies for quarterly submission to the Center for Medicare and Medicaid Services (through collaboration with Department of Social Services) in order to receive this match. In addition to the core funding, an additional \$3.8 million in general revenue, referred to as incentive funding, is available in total to the 115 local public health agencies. The incentive funding is only distributed to an individual agency if the agency is able to demonstrate achievement of specific quality initiatives.</p> <p>Besides funding support, the Center for Local Public Health staff provide a collaborative approach to quality services by holding orientations and trainings for new administrators, boards of health and county commissioners, connecting locals with staff throughout DHSS for specific programmatic technical assistance, and connecting locals with resources and programs through conference calls and in-person regional meetings offered throughout the year. The Department also assists in sponsoring a state-wide annual conference for public health professionals.</p>	
3. PROGRAM LISTING (list programs included in this core funding)	
Core Public Health and Incentive (Enhancements) Funding Local Public Health Services Training, Support, and Technical Assistance	

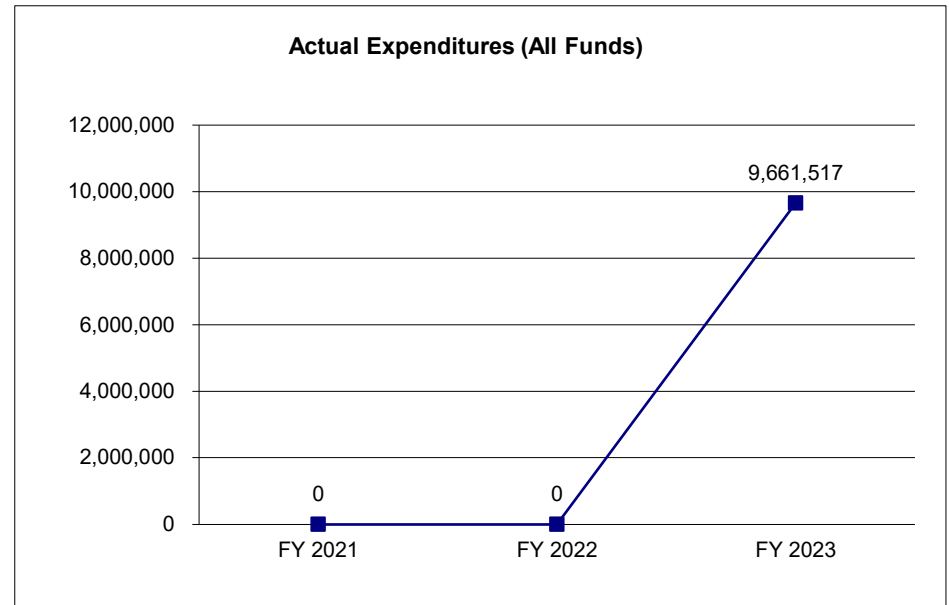
CORE DECISION ITEM

Health and Senior Services
Community and Public Health
Core - Local Public Health Agency Support

Budget Unit 58230C
HB Section 10.745

4. FINANCIAL HISTORY

	FY 2021 Actual	FY 2022 Actual	FY 2023 Actual	FY 2024 Current Yr.
Appropriation (All Funds)	0	0	13,598,354	19,924,106
Less Reverted (All Funds)	0	0	(112,922)	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	0	0	13,485,432	19,924,106
Actual Expenditures (All Funds)	0	0	9,661,517	N/A
Unexpended (All Funds)	0	0	3,823,915	N/A
Unexpended, by Fund:				
General Revenue	0	0	72	N/A
Federal	0	0	3,935,321	N/A
Other	0	0	1,444	N/A



Reverted includes the statutory three percent reserve amount (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.

CORE RECONCILIATION DETAIL

**DEPARTMENT OF HEALTH & SENIOR SERVICES
LOCAL PUBLIC HLTH AGENCY SPRT**

5. CORE RECONCILIATION DETAIL

		Budget Class	FTE	GR	Federal	Other	Total	Explanation
TAFP AFTER VETOES								
		EE	0.00	109,400	0	0	109,400	
		PD	0.00	9,563,292	9,900,000	0	19,463,292	
		Total	0.00	9,672,692	9,900,000	0	19,572,692	
DEPARTMENT CORE ADJUSTMENTS								
Core Reallocation	1209 5056	PS	3.84	291,807	0	0	291,807	CORE reallocations for programmatic alignment.
Core Reallocation	1209 5057	EE	0.00	0	0	14,573	14,573	CORE reallocations for programmatic alignment.
Core Reallocation	1209 5058	EE	0.00	0	286	0	286	CORE reallocations for programmatic alignment.
Core Reallocation	1209 5058	PD	0.00	0	44,748	0	44,748	CORE reallocations for programmatic alignment.
NET DEPARTMENT CHANGES			3.84	291,807	45,034	14,573	351,414	
DEPARTMENT CORE REQUEST								
		PS	3.84	291,807	0	0	291,807	
		EE	0.00	109,400	286	14,573	124,259	
		PD	0.00	9,563,292	9,944,748	0	19,508,040	
		Total	3.84	9,964,499	9,945,034	14,573	19,924,106	
GOVERNOR'S RECOMMENDED CORE								
		PS	3.84	291,807	0	0	291,807	
		EE	0.00	109,400	286	14,573	124,259	
		PD	0.00	9,563,292	9,944,748	0	19,508,040	
		Total	3.84	9,964,499	9,945,034	14,573	19,924,106	

DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
LOCAL PUBLIC HLTH AGENCY SPPRT									
CORE									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	291,807	3.84	291,807	3.84	
TOTAL - PS	0	0.00	0	0.00	291,807	3.84	291,807	3.84	
EXPENSE & EQUIPMENT									
GENERAL REVENUE	7,836	0.00	109,400	0.00	109,400	0.00	109,400	0.00	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	286	0.00	286	0.00	
MO PUBLIC HEALTH SERVICES	0	0.00	0	0.00	14,573	0.00	14,573	0.00	
TOTAL - EE	7,836	0.00	109,400	0.00	124,259	0.00	124,259	0.00	
PROGRAM-SPECIFIC									
GENERAL REVENUE	3,455,508	0.00	9,563,292	0.00	9,563,292	0.00	9,563,292	0.00	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	44,748	0.00	44,748	0.00	
CHILDRENS HEALTH INSURANCE	5,250,344	0.00	9,900,000	0.00	9,900,000	0.00	9,900,000	0.00	
TOTAL - PD	8,705,852	0.00	19,463,292	0.00	19,508,040	0.00	19,508,040	0.00	
TOTAL	8,713,688	0.00	19,572,692	0.00	19,924,106	3.84	19,924,106	3.84	
Pay Plan - 0000012									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	9,339	0.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	9,339	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	9,339	0.00	
GRAND TOTAL	\$8,713,688	0.00	\$19,572,692	0.00	\$19,924,106	3.84	\$19,933,445	3.84	

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58230C BUDGET UNIT NAME: Local Public Health Agency Support HOUSE BILL SECTION: 10.745	DEPARTMENT: Department of Health and Senior Services (DHSS) DIVISION: Division of Community and Public Health (DCPH)
1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.	
DEPARTMENT REQUEST	
Based on the recommendations of the Legislative body in previous years, DHSS has worked to create and breakdown CORES within DCPH in order to provide more transparency. The Department requests fifty percent (50%) flexibility between House Bills 10.700, 10.705, 10.710, 10.715, 10.720, 10.725, 10.730, 10.735, 10.740, 10.745, 10.750, 10.755, 10.760, 10.765, 10.770, and 10.775 in order to ensure continuity of operations during the transition.	
2. Estimate how much flexibility will be used for the budget year. How much flexibility was used in the Prior Year Budget and the Current Year Budget? Please specify the amount.	
PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT YEAR ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
Not applicable.	Not applicable.
BUDGET REQUEST ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED	
Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of Governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The Department's requested flex will allow the Department to utilize available resources in the most effective manner as the need arises. Flexibility (50%) between House bill sections will allow for continuity of operations as DCPH continues to align budget structure with its operating structure. The Department cannot predict how much flexibility will be utilized.	
3. Please explain how flexibility was used in the prior and/or current years.	
PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
Not applicable.	Not applicable.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
LOCAL PUBLIC HLTH AGENCY SPPRT								
CORE								
PROJECT SPECIALIST	0	0.00	0	0.00	62,520	1.13	62,520	1.13
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	75,961	1.13	75,961	1.13
PUBLIC HEALTH PROGRAM SPV	0	0.00	0	0.00	48,090	0.56	48,090	0.56
PUBLIC HEALTH PROGRAM MANAGER	0	0.00	0	0.00	105,236	1.02	105,236	1.02
TOTAL - PS	0	0.00	0	0.00	291,807	3.84	291,807	3.84
TRAVEL, IN-STATE	2,023	0.00	500	0.00	1,307	0.00	1,307	0.00
TRAVEL, OUT-OF-STATE	309	0.00	0	0.00	4	0.00	4	0.00
SUPPLIES	3,997	0.00	100	0.00	5,753	0.00	5,753	0.00
PROFESSIONAL DEVELOPMENT	0	0.00	500	0.00	1,368	0.00	1,368	0.00
COMMUNICATION SERV & SUPP	1,450	0.00	600	0.00	3,223	0.00	3,223	0.00
PROFESSIONAL SERVICES	57	0.00	107,500	0.00	111,723	0.00	111,723	0.00
M&R SERVICES	0	0.00	0	0.00	366	0.00	366	0.00
MOTORIZED EQUIPMENT	0	0.00	0	0.00	306	0.00	306	0.00
OTHER EQUIPMENT	0	0.00	200	0.00	209	0.00	209	0.00
TOTAL - EE	7,836	0.00	109,400	0.00	124,259	0.00	124,259	0.00
PROGRAM DISTRIBUTIONS	8,705,852	0.00	19,463,292	0.00	19,508,040	0.00	19,508,040	0.00
TOTAL - PD	8,705,852	0.00	19,463,292	0.00	19,508,040	0.00	19,508,040	0.00
GRAND TOTAL	\$8,713,688	0.00	\$19,572,692	0.00	\$19,924,106	3.84	\$19,924,106	3.84
GENERAL REVENUE	\$3,463,344	0.00	\$9,672,692	0.00	\$9,964,499	3.84	\$9,964,499	3.84
FEDERAL FUNDS	\$5,250,344	0.00	\$9,900,000	0.00	\$9,945,034	0.00	\$9,945,034	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$14,573	0.00	\$14,573	0.00

PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.745</u>
Local Public Health Agency Support	
Program is found in the following core budget(s): Local Public Health Agency Support	
1a. What strategic priority does this program address?	
Build and Strengthen Partnerships, Use Clear and Consistent Communication to Build Trust, Expand Access to Services, Include Diversity and Inclusion in All Practices, Programs and Services, Re-envision and Strengthen Workforce, Invest in Innovation to Modernize Infrastructure	
1b. What does this program do?	
<p>The Department of Health and Senior Services (DHSS), Center for Local Public Health administers participation agreements with 115 local health agencies to ensure public health services are available in every county in Missouri. The presence of public health services at the local level is essential for protecting health and keeping people safe. The local health agencies are a vital partner in providing statewide services including, but not limited to, communicable disease surveillance and outbreak response, environmental surveillance (retail food, lodging, on-site sewage, childcare sanitation), immunizations, infectious disease testing and referral to care, chronic disease prevention and control, education, public health emergency preparedness and response, and vital record issuance.</p> <p>The funding administered allows local health agencies to utilize funding as needed to deliver public health services in cooperation with DHSS. While DHSS is available for technical assistance and may lead activities in some program areas, public health services statewide would not be available without the existence of local public health agencies. State funding constitutes a different percentage of each local health department's total budget, but overall, public health in Missouri remains underfunded and state funding is necessary to maintain local delivery of these services. The federal funding (49 percent of the total in FY 2024) distributed through these core participation agreements is the result of federal match received on expenditures reported by locals for specific unreimbursed services they have delivered to children age 0 through 19 (Children's Health Insurance Program, Health Services Initiative (CHIP H.S.I.)). DHSS staff provide technical assistance regarding CHIP H.S.I. claiming, and collect and aggregate the expenditure data for all 115 agencies for quarterly submission to the Center for Medicare and Medicaid Services (through collaboration with Department of Social Services) in order to receive this match. In addition to the core funding, an additional \$3.8 million in general revenue, referred to as incentive funding, is available in total to the 115 local public health agencies. The incentive funding is only distributed to an individual agency if the agency is able to demonstrate achievement of specific quality initiatives.</p> <p>Besides funding support, the Center for Local Public Health staff provide a collaborative approach to quality services by holding orientations and trainings for new administrators, boards of health and county commissioners, connecting locals with staff throughout DHSS for specific programmatic technical assistance, and connecting locals with resources and programs through conference calls and in-person regional meetings offered throughout the year. The DHSS also assists in sponsoring a state-wide annual conference for public health professionals.</p>	

PROGRAM DESCRIPTION

Health and Senior Services **HB Section(s):** 10.745

Local Public Health Agency Support

Program is found in the following core budget(s): Local Public Health Agency Support

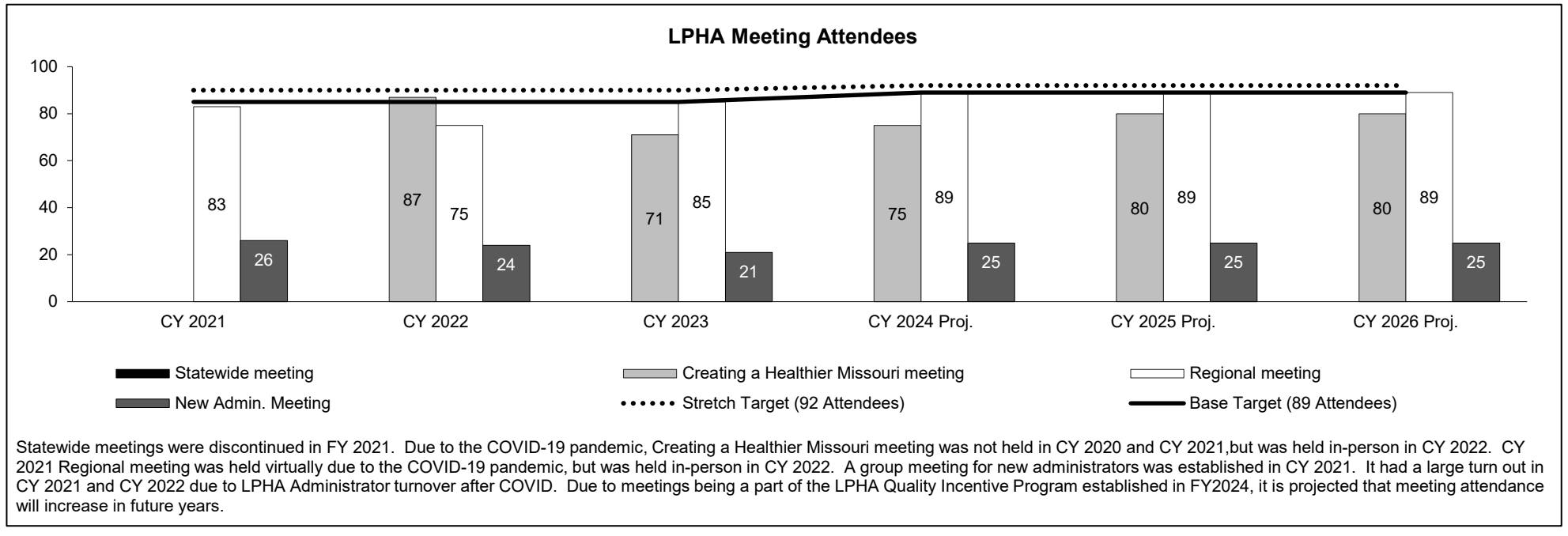
2a. Provide an activity measure(s) for the program.

LPHAs Served by the Center for Local Public Health Services	FY 2021	FY 2022	FY 2023	FY 2024 Proj.	FY 2025 Proj.	FY 2026 Proj.
LPHAs with CORE Participation Agreements	114	115*	115	115	115	115
LPHAs receiving individualized training/technical assistance**	12	44	13	26	26	26
Regional Public Health Meetings, Statewide and/or New Administrator Meetings Offered***	2	3	3	3	3	3

*Independence closure 6/30/18 reduced the number of LPHAs to 114 starting FY 2019. Independence reopened in FY 2021 and will enter into a CORE agreement in FY 2022.

**LPHAs receive training/technical assistance regarding CHIP H.S.I claiming and new administrators, as well as, local boards of health orientation. Due to COVID-19, LPHAs were not as available for trainings as they have been in years prior. Higher numbers in FY 2022 were due to a large turnover in staff due to COVID which increased the need for trainings. It is projected that trainings will increase in FY 2024, FY 2025, and FY 2026 as trainings are a part of the LPHA Quality Incentive Program that was established in FY 2024.

***Statewide meetings were discontinued in FY 2021. In-person group New Administrator Meetings were hosted beginning in FY 2022 and will continue. Regional meetings consist of the same agenda offered at six locations throughout the state. Due to COVID-19, the regional meetings were held virtually but resumed in-person in FY 2023.



PROGRAM DESCRIPTION

Health and Senior Services

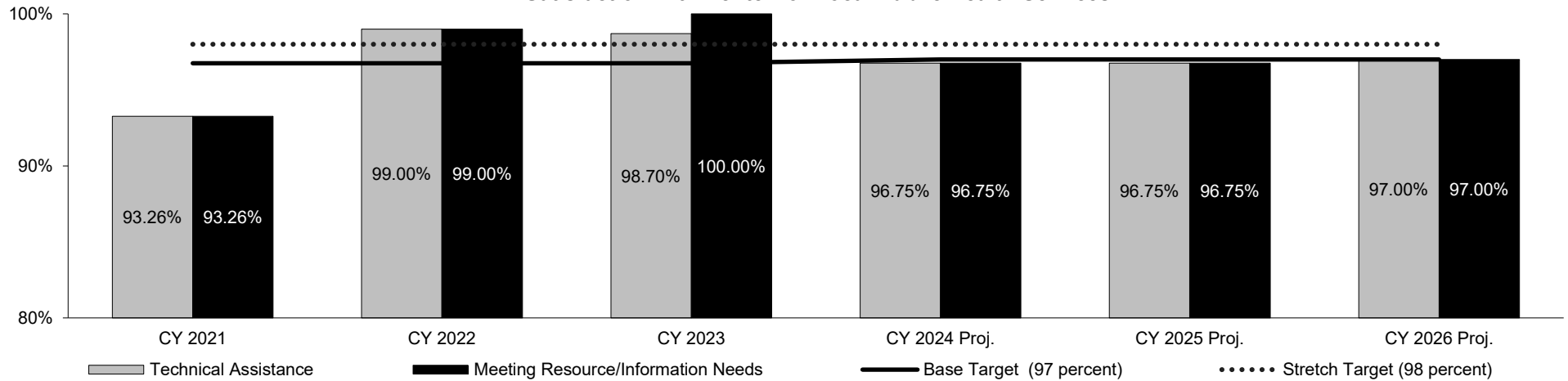
HB Section(s): 10.745

Local Public Health Agency Support

Program is found in the following core budget(s): Local Public Health Agency Support

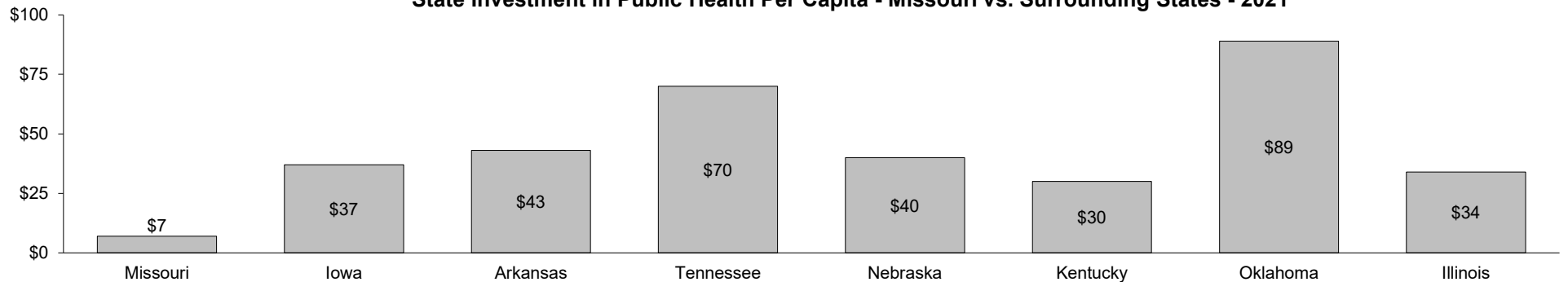
2b. Provide a measure(s) of the program's quality.

LPHA Satisfaction with Center for Local Public Health Services



*Data available December 2023.

State Investment in Public Health Per Capita - Missouri vs. Surrounding States - 2021



Source: State Health Access Data Assistance Center, University of Minnesota and funded by the Robert Wood Johnson Foundation. Link: <http://statehealthcompare.shadac.org/rank/117/per-person-state-public-health-funding>. Kansas data was not available for 2021.

PROGRAM DESCRIPTION

Health and Senior Services

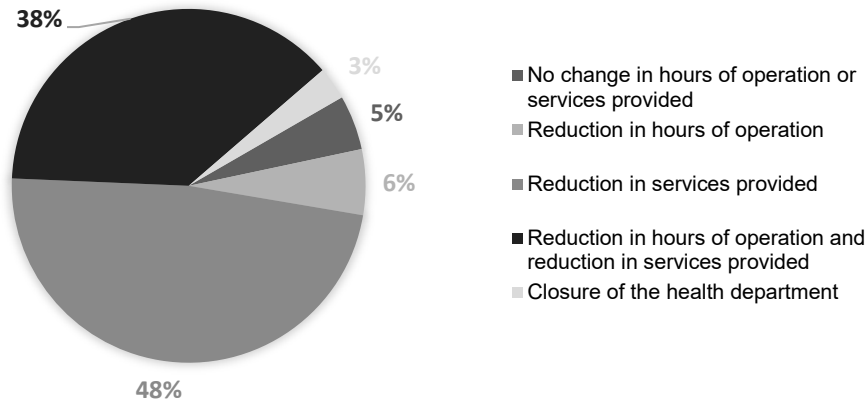
HB Section(s): 10.745

Local Public Health Agency Support

Program is found in the following core budget(s): Local Public Health Agency Support

2c. Provide a measure(s) of the program's impact.

FY 2023 Reported Impact to LPHAs if Core Funding Ceased to Exist



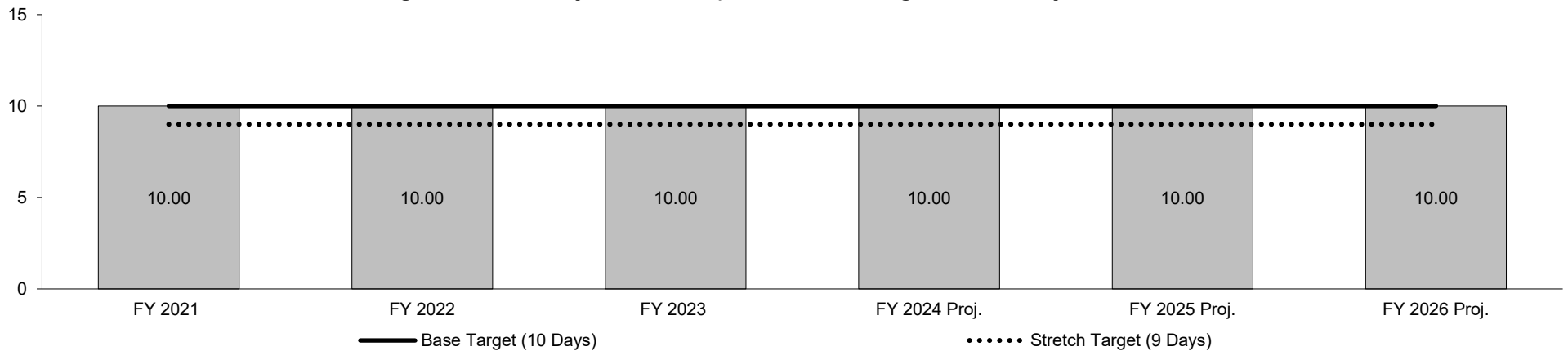
Total Public Health Revenue of LPHA Derived from CORE Participation Funding

Population of Jurisdiction	Number of LPHAs	Average of Total
< 6,000	10	18.37%
6,001 - 10,000	16	10.92%
10,000 - 25,000	45	8.81%
25,001 - 50,000	18	6.18%
50,001 - 150,000	18	5.71%
>150,000	8	3.18%

Source: 2022 LPHA Financial Report.

2d. Provide a measure(s) of the program's efficiency.

Average Number of Days from Receipt of Core Funding Invoice to Payment Issuance



PROGRAM DESCRIPTION

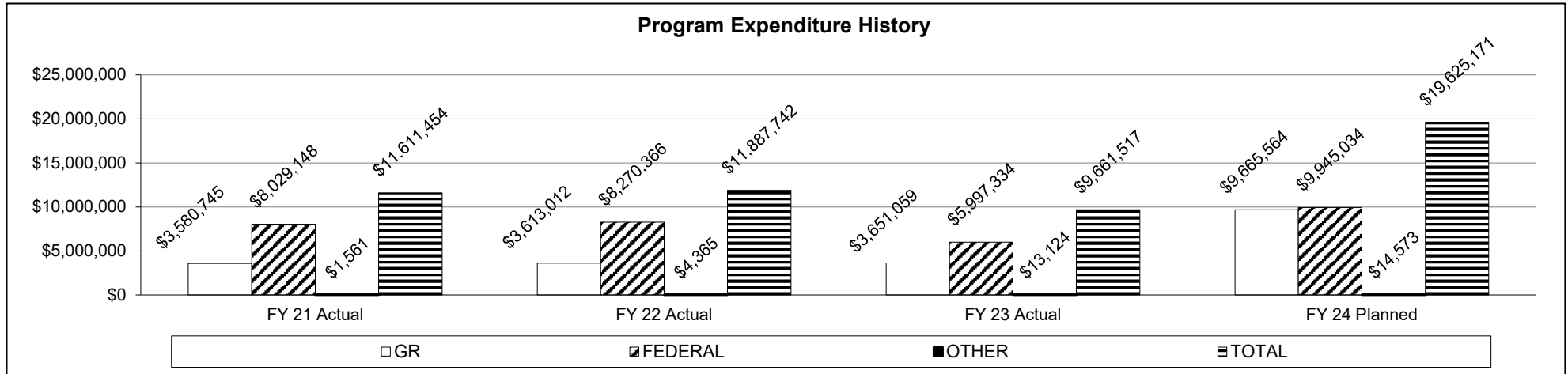
Health and Senior Services

HB Section(s): 10.745

Local Public Health Agency Support

Program is found in the following core budget(s): Local Public Health Agency Support

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Missouri Public Health Services (0298).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 167.181, 191.668, 191.677, 192.020, 192.031, 192.072, 192.080, 192.090, 192.110, 192.510, 196.030, 196.045, 196.055, 196.240, 196.866, 196.951, 199.170-270, 199.350, 210.003, 210.050, 315.007, 322.140, 701.033, 701.326, 701.328, 701.336, and 701.343, RSMo (Disease Surveillance, Communicable Disease Prevention, Immunization, Environmental Public Health and Safety, Childhood Lead Poisoning Prevention).

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

CORE DECISION ITEM

Health and Senior Services					Budget Unit 58590C				
Community and Public Health									
Core - Nutrition Services					HB Section 10.750				
1. CORE FINANCIAL SUMMARY									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	14,089	3,279,016	0	3,293,105	PS	14,089	3,279,016	0	3,293,105
EE	0	2,988,005	0	2,988,005	EE	0	2,988,005	0	2,988,005
PSD	0	207,858,388	0	207,858,388	PSD	0	207,858,388	0	207,858,388
TRF	0	0	0	0	TRF	0	0	0	0
Total	14,089	214,125,409	0	214,139,498	Total	14,089	214,125,409	0	214,139,498
FTE	0.19	57.34	0.00	57.53	FTE	0.19	57.34	0.00	57.53
Est. Fringe	8,105	2,083,279	0	2,091,383	Est. Fringe	8,105	2,083,279	0	2,091,383
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.				
Federal Funds: Department of Health and Senior Services Federal (0143) and Temporary Assistance for Needy Families (0199).									
2. CORE DESCRIPTION									
The nutrition initiatives programs implement services and activities that increase access to healthy, nutritious food, which in turn increases positive health outcomes for eligible Missourians and reduces preventable nutrition-related illnesses and deaths. The nutrition initiatives programs improve nutritional health through a variety of services. Services provided include: health screening and risk assessment; nutrition counseling; breastfeeding promotion and support; referrals to health and social services; benefits to purchase specific food items needed for good health; reimbursement for meals which meet federally prescribed guidelines; and distribution of commodity food packages.									
Specific programs include:									
<ul style="list-style-type: none">• WIC, the Special Supplemental Nutrition Program for Women, Infants, and Children, which provides supplemental nutritious foods, nutrition education, breastfeeding promotion and support, and referrals to health and other social services for low-income pregnant, breastfeeding, and postpartum women, and to infants and children up to age five who are found to be at nutritional risk;• The Child and Adult Care Food Program (CACFP), which improves the nutritional health of children and adults in child care centers, family child care homes, adult day care facilities, emergency/homeless shelters, and afterschool programs;• The Summer Food Service Program (SFSP), which assures that low-income children continue to receive nutritious meals when school is not in session and during times of emergency such as the COVID-19 pandemic when all schools were closed or operating virtually; and• The Commodity Supplemental Food Program (CSFP), which improves the nutrient intake needed for adults 60 years of age and older by providing supplemental commodity food which contains needed sources of iron, calcium, protein, and vitamins A and C.									

CORE DECISION ITEM

Health and Senior Services		Budget Unit		58590C	
Community and Public Health					
Core - Nutrition Services		HB Section		10.750	
3. PROGRAM LISTING (list programs included in this core funding)					
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)					
Breastfeeding Peer Counseling Program					
Breastfeeding Program					
Child and Adult Care Food Program (CACFP)					
Summer Food Service Program (SFSP)					
Commodity Supplemental Food Program (CSFP)					
4. FINANCIAL HISTORY					
	FY 2021	FY 2022	FY 2023	FY 2024	
	Actual	Actual	Actual	Current Yr.	
Appropriation (All Funds)	0	0	219,876,497	214,139,499	
Less Reverted (All Funds)	0	0	(305)	0	
Less Restricted (All Funds)	0	0	0	0	
Budget Authority (All Funds)	0	0	219,876,192	214,139,499	
Actual Expenditures (All Funds)	0	0	122,715,732	N/A	
Unexpended (All Funds)	0	0	97,160,460	N/A	
Unexpended, by Fund:					
General Revenue	0	0	8,351	N/A	
Federal	0	0	97,152,109	N/A	
Other	0	0	0	N/A	

Actual Expenditures (All Funds)

Fiscal Year	Actual Expenditures (All Funds)
FY 2021	0
FY 2022	0
FY 2023	122,715,732

Reverted includes the statutory three percent reserve amount (when applicable).
Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES NUTRITION SERVICES

5. CORE RECONCILIATION DETAIL

				Budget Class	FTE	GR	Federal	Other	Total	Explanation
TAFP AFTER VETOES										
				EE	0.00	0	2,525,000	0	2,525,000	
				PD	0.00	0	40,419,984	0	40,419,984	
				Total	0.00	0	42,944,984	0	42,944,984	
DEPARTMENT CORE ADJUSTMENTS										
Core Reallocation	887	5059	PS	0.19	14,089	0	0	14,089	CORE reallocations for programmatic alignment.	
Core Reallocation	887	5079	PS	57.34	0	3,279,016	0	3,279,016	CORE reallocations for programmatic alignment.	
Core Reallocation	887	5080	EE	0.00	0	463,005	0	463,005	CORE reallocations for programmatic alignment.	
Core Reallocation	887	5717	PD	0.00	0	144,235,867	0	144,235,867	CORE reallocations for programmatic alignment.	
Core Reallocation	887	5719	PD	0.00	0	250,000	0	250,000	CORE reallocations for programmatic alignment.	
Core Reallocation	887	5718	PD	0.00	0	22,911,478	0	22,911,478	CORE reallocations for programmatic alignment.	
Core Reallocation	887	5080	PD	0.00	0	41,059	0	41,059	CORE reallocations for programmatic alignment.	
NET DEPARTMENT CHANGES				57.53	14,089	171,180,425	0	171,194,514		
DEPARTMENT CORE REQUEST										
				PS	57.53	14,089	3,279,016	0	3,293,105	
				EE	0.00	0	2,988,005	0	2,988,005	
				PD	0.00	0	207,858,388	0	207,858,388	
				Total	57.53	14,089	214,125,409	0	214,139,498	

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES
NUTRITION SERVICES

5. CORE RECONCILIATION DETAIL

	Budget Class	FTE	GR	Federal	Other	Total	Explanation
GOVERNOR'S RECOMMENDED CORE							
	PS	57.53	14,089	3,279,016	0	3,293,105	
	EE	0.00	0	2,988,005	0	2,988,005	
	PD	0.00	0	207,858,388	0	207,858,388	
	Total	57.53	14,089	214,125,409	0	214,139,498	

DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
NUTRITION SERVICES									
CORE									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	14,089	0.19	14,089	0.19	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	3,279,016	57.34	3,279,016	57.34	
TOTAL - PS	0	0.00	0	0.00	3,293,105	57.53	3,293,105	57.53	
EXPENSE & EQUIPMENT									
DHSS-FEDERAL AND OTHER FUNDS	2,584,260	0.00	2,525,000	0.00	2,988,005	0.00	2,988,005	0.00	
TOTAL - EE	2,584,260	0.00	2,525,000	0.00	2,988,005	0.00	2,988,005	0.00	
PROGRAM-SPECIFIC									
DHSS-FEDERAL AND OTHER FUNDS	27,110,040	0.00	40,419,984	0.00	207,608,388	0.00	207,608,388	0.00	
TEMP ASSIST NEEDY FAM FEDERAL	0	0.00	0	0.00	250,000	0.00	250,000	0.00	
TOTAL - PD	27,110,040	0.00	40,419,984	0.00	207,858,388	0.00	207,858,388	0.00	
TOTAL	29,694,300	0.00	42,944,984	0.00	214,139,498	57.53	214,139,498	57.53	
Pay Plan - 0000012									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	451	0.00	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	0	0.00	108,478	0.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	108,929	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	108,929	0.00	
Increase Nutrition Specialists - 1580014									
PERSONAL SERVICES									
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	110,880	2.00	110,880	0.00	
TOTAL - PS	0	0.00	0	0.00	110,880	2.00	110,880	0.00	
EXPENSE & EQUIPMENT									
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	32,610	0.00	32,610	0.00	
TOTAL - EE	0	0.00	0	0.00	32,610	0.00	32,610	0.00	
TOTAL	0	0.00	0	0.00	143,490	2.00	143,490	0.00	
GRAND TOTAL	\$29,694,300	0.00	\$42,944,984	0.00	\$214,282,988	59.53	\$214,391,917	57.53	

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58590C BUDGET UNIT NAME: Nutrition Services HOUSE BILL SECTION: 10.750	DEPARTMENT: Department of Health and Senior Services (DHSS) DIVISION: Division of Community and Public Health (DCPH)
1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.	
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3. Please explain how flexibility was used in the prior and/or current years.	
PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
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DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
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Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
NUTRITION SERVICES								
CORE								
PROJECT SPECIALIST	0	0.00	0	0.00	48,273	0.84	48,273	0.84
ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	59,339	1.69	59,339	1.69
LEAD ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	68,279	1.69	68,279	1.69
CUSTOMER SERVICE REP	0	0.00	0	0.00	107,915	2.53	107,915	2.53
BUSINESS PROJECT MANAGER	0	0.00	0	0.00	49,235	0.84	49,235	0.84
SR BUSINESS PROJECT MANAGER	0	0.00	0	0.00	64,971	0.84	64,971	0.84
SENIOR PROGRAM SPECIALIST	0	0.00	0	0.00	168,835	2.53	168,835	2.53
RESEARCH/DATA ANALYST	0	0.00	0	0.00	46,116	0.84	46,116	0.84
SENIOR RESEARCH/DATA ANALYST	0	0.00	0	0.00	55,339	0.84	55,339	0.84
NUTRITION SPECIALIST	0	0.00	0	0.00	709,954	12.68	709,954	12.68
SENIOR NUTRITIONIST	0	0.00	0	0.00	326,087	5.13	326,087	5.13
PUBLIC HEALTH PROGRAM ASSOC	0	0.00	0	0.00	309,800	6.81	309,800	6.81
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	500,137	9.30	500,137	9.30
SR PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	163,847	2.53	163,847	2.53
PUBLIC HEALTH PROGRAM SPV	0	0.00	0	0.00	476,502	6.75	476,502	6.75
PUBLIC HEALTH PROGRAM MANAGER	0	0.00	0	0.00	138,476	1.69	138,476	1.69
TOTAL - PS	0	0.00	0	0.00	3,293,105	57.53	3,293,105	57.53
TRAVEL, IN-STATE	0	0.00	0	0.00	56,582	0.00	56,582	0.00
TRAVEL, OUT-OF-STATE	0	0.00	0	0.00	31,937	0.00	31,937	0.00
SUPPLIES	2,025,055	0.00	700,000	0.00	853,512	0.00	853,512	0.00
PROFESSIONAL DEVELOPMENT	5,850	0.00	20,000	0.00	58,059	0.00	58,059	0.00
COMMUNICATION SERV & SUPP	1,412	0.00	5,000	0.00	15,428	0.00	15,428	0.00
PROFESSIONAL SERVICES	551,923	0.00	1,775,000	0.00	1,929,388	0.00	1,929,388	0.00
M&R SERVICES	0	0.00	10,000	0.00	11,647	0.00	11,647	0.00
COMPUTER EQUIPMENT	0	0.00	15,000	0.00	15,000	0.00	15,000	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	2,604	0.00	2,604	0.00
OTHER EQUIPMENT	0	0.00	0	0.00	6,989	0.00	6,989	0.00
BUILDING LEASE PAYMENTS	20	0.00	0	0.00	0	0.00	0	0.00
MISCELLANEOUS EXPENSES	0	0.00	0	0.00	6,859	0.00	6,859	0.00
TOTAL - EE	2,584,260	0.00	2,525,000	0.00	2,988,005	0.00	2,988,005	0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
NUTRITION SERVICES								
CORE								
PROGRAM DISTRIBUTIONS	27,110,040	0.00	40,419,984	0.00	207,858,388	0.00	207,858,388	0.00
TOTAL - PD	27,110,040	0.00	40,419,984	0.00	207,858,388	0.00	207,858,388	0.00
GRAND TOTAL	\$29,694,300	0.00	\$42,944,984	0.00	\$214,139,498	57.53	\$214,139,498	57.53
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$14,089	0.19	\$14,089	0.19
FEDERAL FUNDS	\$29,694,300	0.00	\$42,944,984	0.00	\$214,125,409	57.34	\$214,125,409	57.34
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

PROGRAM DESCRIPTION

Department of Health and Senior Services	HB Section(s): <u>10.750</u>
Nutrition Services	
Program is found in the following core budget(s): <u>Nutrition Services</u>	
<p>1a. What strategic priority does this program address? Build and Strengthen Partnerships, Use Clear and Consistent Communication to Build Trust, Expand Access to Services, Include Diversity and Inclusion in All Practices, Programs and Services, Expand Access to Services, Invest in Innovation to Modernize Infrastructure.</p> <p>1b. What does this program do? The nutrition initiatives programs implement services and activities that increase access to healthy, nutritious food, which in turn increases positive health outcomes for eligible Missourians and reduces preventable nutrition-related illnesses and deaths.</p> <p>Specific programs include:</p> <ul style="list-style-type: none"> • WIC, the Special Supplemental Nutrition Program for Women, Infants, and Children, which provides supplemental nutritious foods, nutrition education, breastfeeding promotion and support, and referrals to health and other social services for low-income pregnant, breastfeeding, and postpartum women, and to infants and children up to age five who are found to be at nutritional risk; • The Child and Adult Care Food Program (CACFP), which improves the nutritional health of children and adults in child care centers, family child care homes, adult day care facilities, emergency/homeless shelters, and afterschool programs; • The Summer Food Service Program (SFSP), which assures that low-income children continue to receive nutritious meals when school is not in session and during times of emergency such as the COVID-19 pandemic when all schools were closed or operating virtually; and • The Commodity Supplemental Food Program (CSFP), which improves the nutrient intake needed for adults 60 years of age and older by providing supplemental commodity food which contains needed sources of iron, calcium, protein, and vitamins A and C. <p>The programs improve nutritional health through a variety of services, such as:</p> <ul style="list-style-type: none"> • Health screening and risk assessment; • Nutrition counseling; • Breastfeeding promotion and support; • Referrals to health and social services; • Benefits to purchase specific food items needed for good health; • Reimbursement for meals which meet federally prescribed guidelines; and • Distribution of commodity food packages. 	

PROGRAM DESCRIPTION

Department of Health and Senior Services

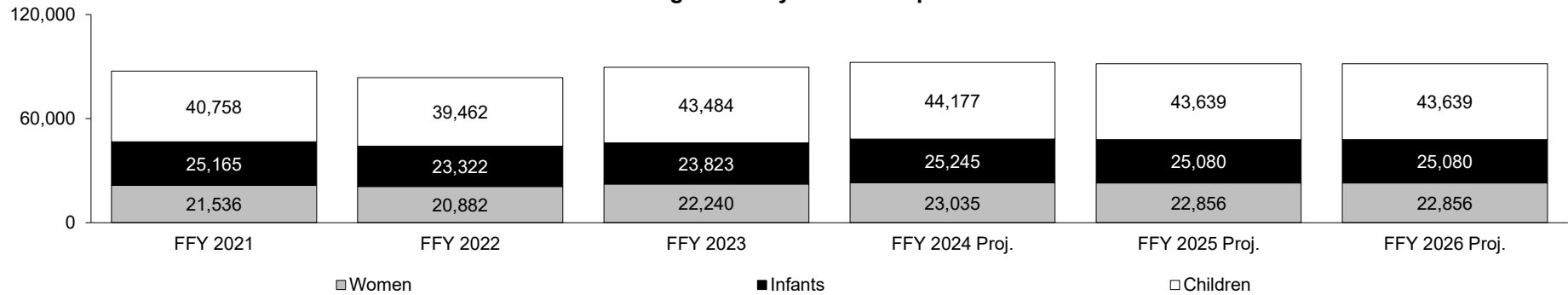
HB Section(s): 10.750

Nutrition Services

Program is found in the following core budget(s): Nutrition Services

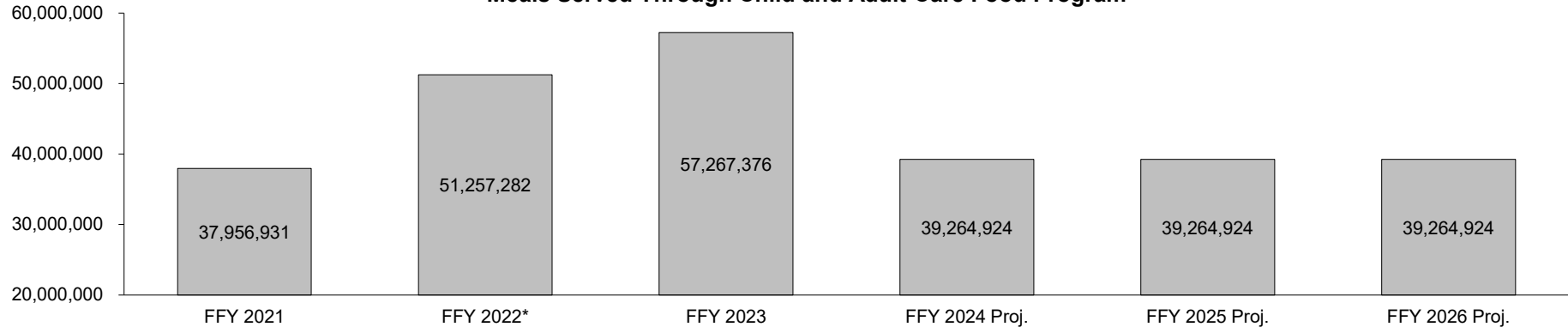
2a. Provide an activity measure(s) for the program.

Average Monthly WIC Participation



According to the USDA website, WIC participation has continued to decline nationwide since 2010. WIC experienced a decrease in caseload during the COVID-19 pandemic due to exposure concerns and other related onsite service barriers. Projections are based on monthly average participation change for the prior three years and current year's actual and projected data.

Meals Served Through Child and Adult Care Food Program



The Child and Adult Care Food Program serves:

Children ages 18 and under enrolled in care programs; children under age 18 enrolled in afterschool programs in at-risk areas or residing in emergency shelters with their families; children and adults with physical or mental disabilities; and children ages 15 and under who are children of migrant workers.

*Significant FFY 2022 increase due to USDA waivers initiated to assist with COVID-19 and centers returning to full capacity.

PROGRAM DESCRIPTION

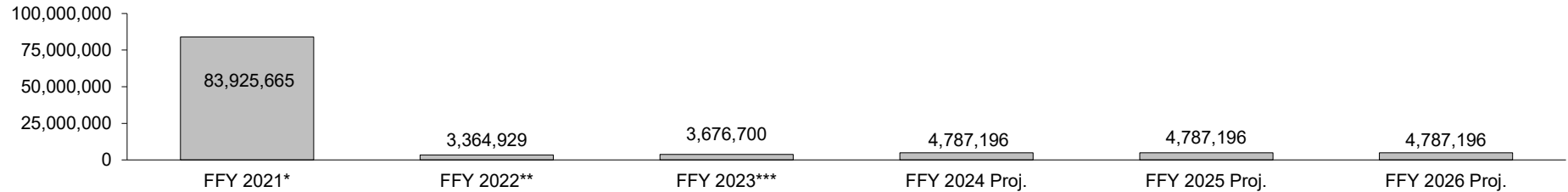
Department of Health and Senior Services **HB Section(s):** 10.750

Nutrition Services

Program is found in the following core budget(s): Nutrition Services

2a. Provide an activity measure(s) for the program. (continued)

Meals Served Through Summer Food Service Program



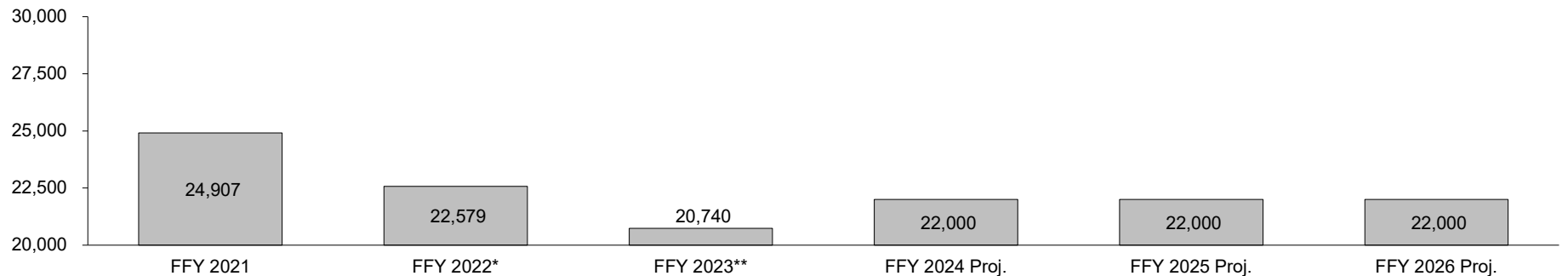
The Summer Food Service Program serves: Children aged 18 and under, and physically or mentally disabled adults who participate in school-sponsored programs during the school year.

*Due to COVID-19 emergency meal service and USDA waivers, FFY 2021 increased exponentially.

**FFY 2022 meal service was significantly less than FFY 2021 due to operating only during the summer.

*** Final FFY 2023 data will not be available until after December 2023.

Commodity Boxes Distributed Monthly Through the Commodity Supplemental Food Program



Commodity boxes are distributed monthly to qualified program participants age 60 and older through local food pantries. Each monthly commodity box contains: fruits and juices; dry cereal, farina, rolled oats, or grits; proteins (canned beef, chicken, beef stew, chili, tuna, or salmon); milk (UHT shelf stable or instant nonfat dry); peanut butter/dry beans; potatoes, pasta, or rice; cheese; and vegetables.

*Due to the COVID-19 pandemic, senior participation during the pandemic in FFY 2021 decreased, therefore USDA decreased Missouri's caseload for FFY 2022.

**Due to the continued lack of senior participation in CSFP, the USDA decreased Missouri's caseload further in FFY 2023.

PROGRAM DESCRIPTION

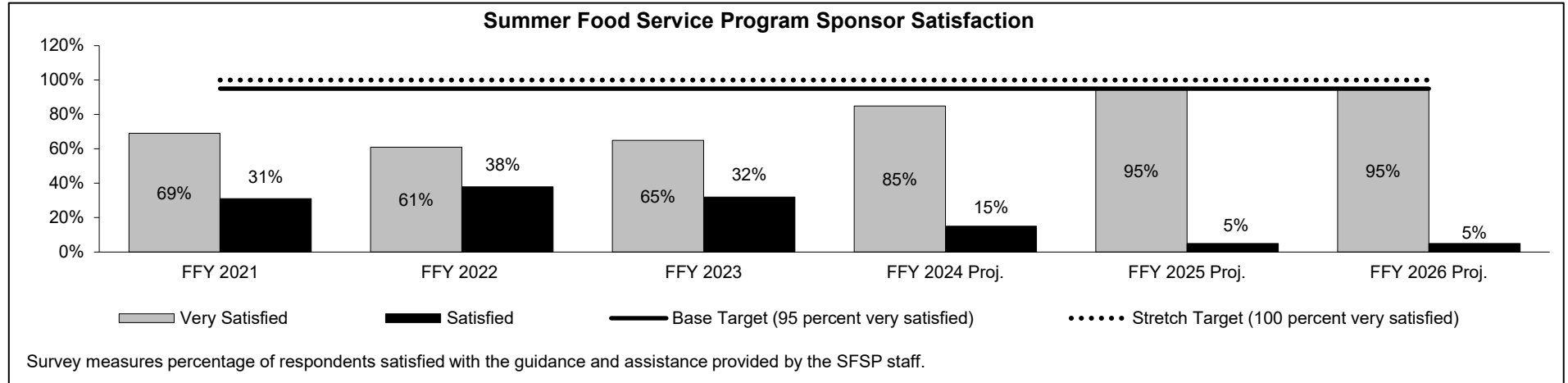
Department of Health and Senior Services

HB Section(s): 10.750

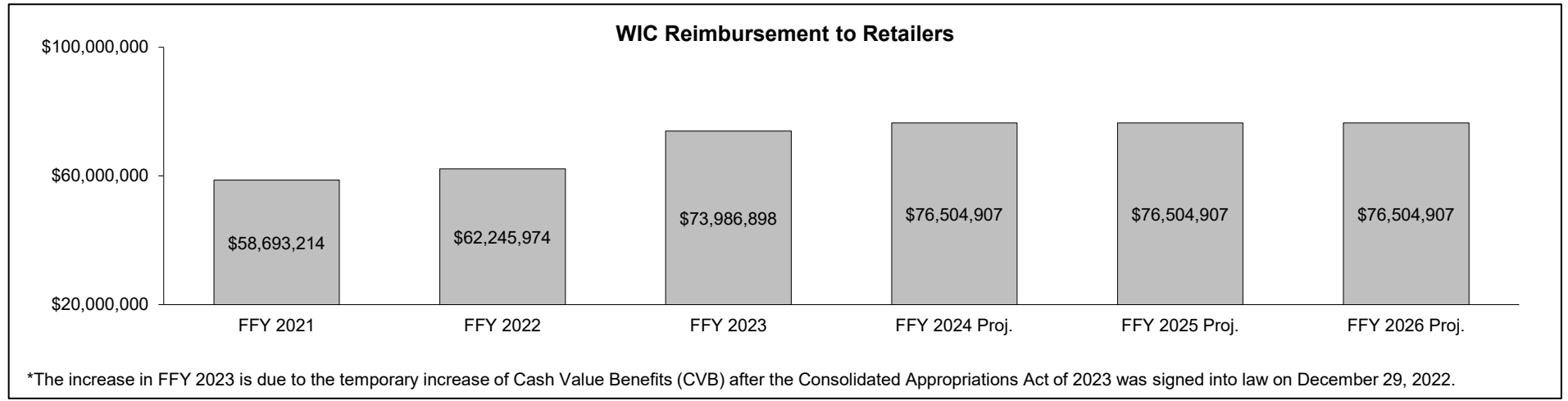
Nutrition Services

Program is found in the following core budget(s): Nutrition Services

2b. Provide a measure(s) of the program's quality.



2c. Provide a measure(s) of the program's impact.



PROGRAM DESCRIPTION

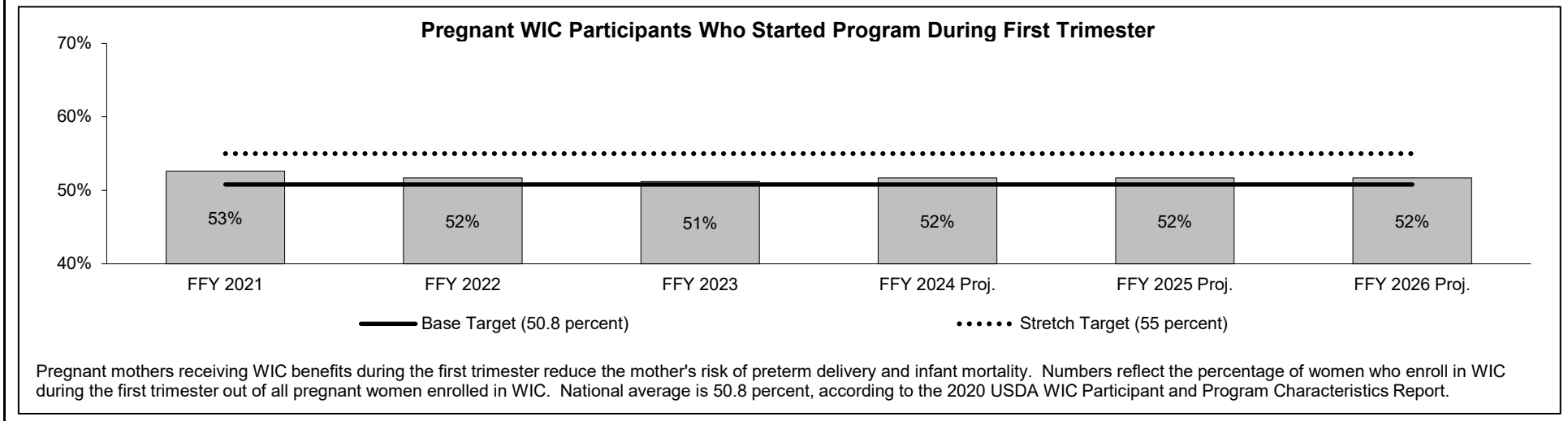
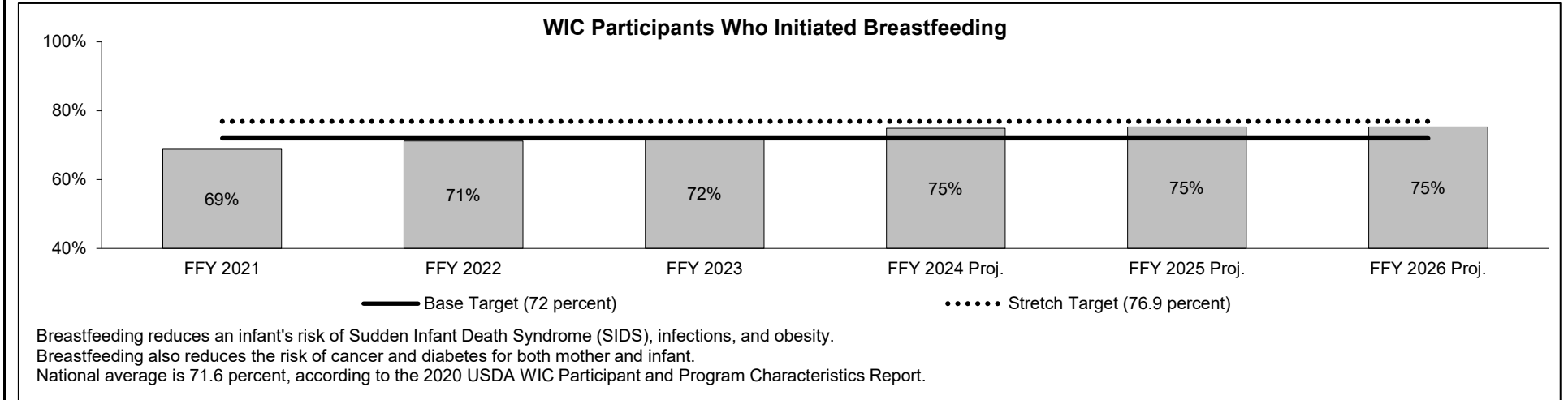
Department of Health and Senior Services

HB Section(s): 10.750

Nutrition Services

Program is found in the following core budget(s): Nutrition Services

2c. Provide a measure(s) of the program's impact. (continued)



PROGRAM DESCRIPTION

Department of Health and Senior Services

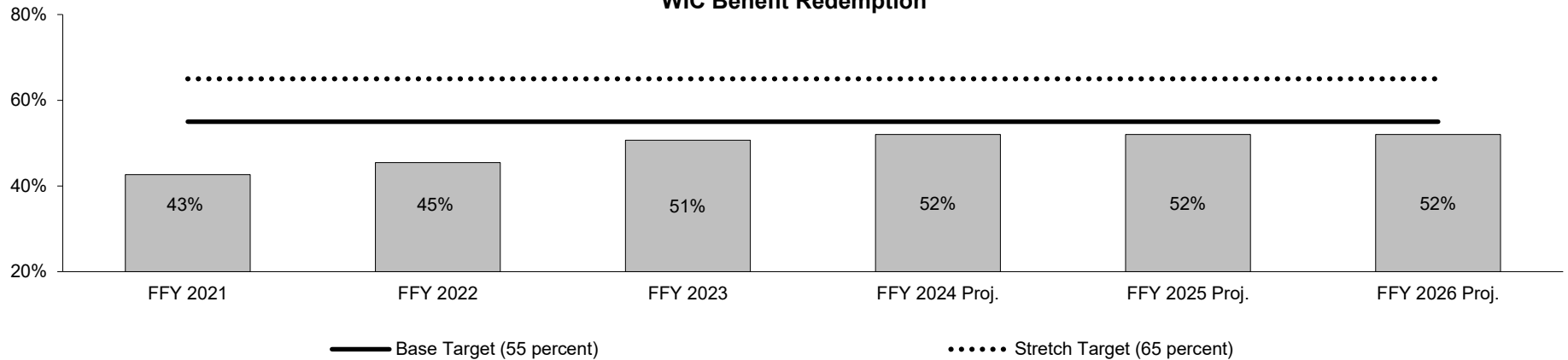
HB Section(s): 10.750

Nutrition Services

Program is found in the following core budget(s): Nutrition Services

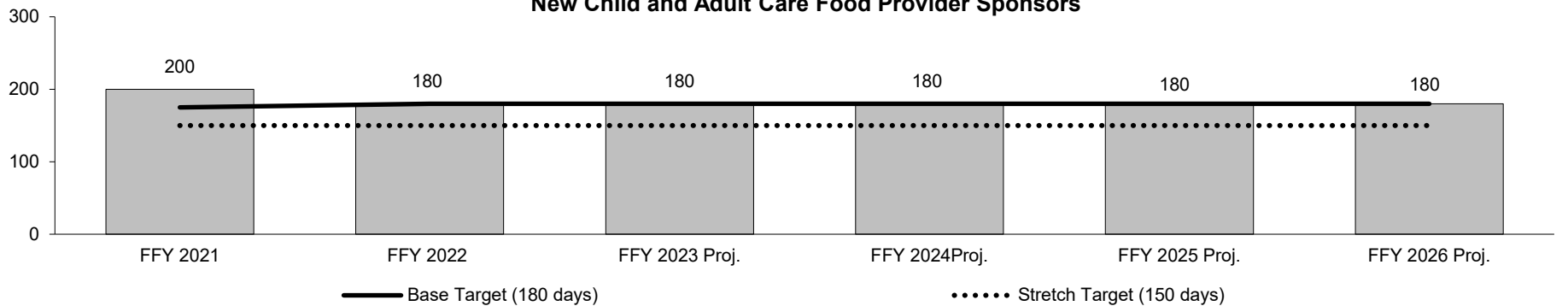
2d. Provide a measure(s) of the program's efficiency.

WIC Benefit Redemption



The COVID-19 pandemic and the implementation of eWIC impacted WIC Benefit Redemption due to food distribution issues, concerns for COVID exposure, a learning curve in understanding how to use the eWIC card, and stores adjusting to the new process which could negatively impact benefit redemption.

Average Number of Days From Enrollment to Technical Assistance Visit for New Child and Adult Care Food Provider Sponsors



In order to more readily establish program integrity, program staff's goal is to provide new CACFP sponsors a technical assistance visit within the first 180 - 200 days of operation. The technical assistance visits are the most beneficial when sponsors have submitted at least three monthly claims; therefore, a visit should not be completed any earlier than 125 days.

PROGRAM DESCRIPTION

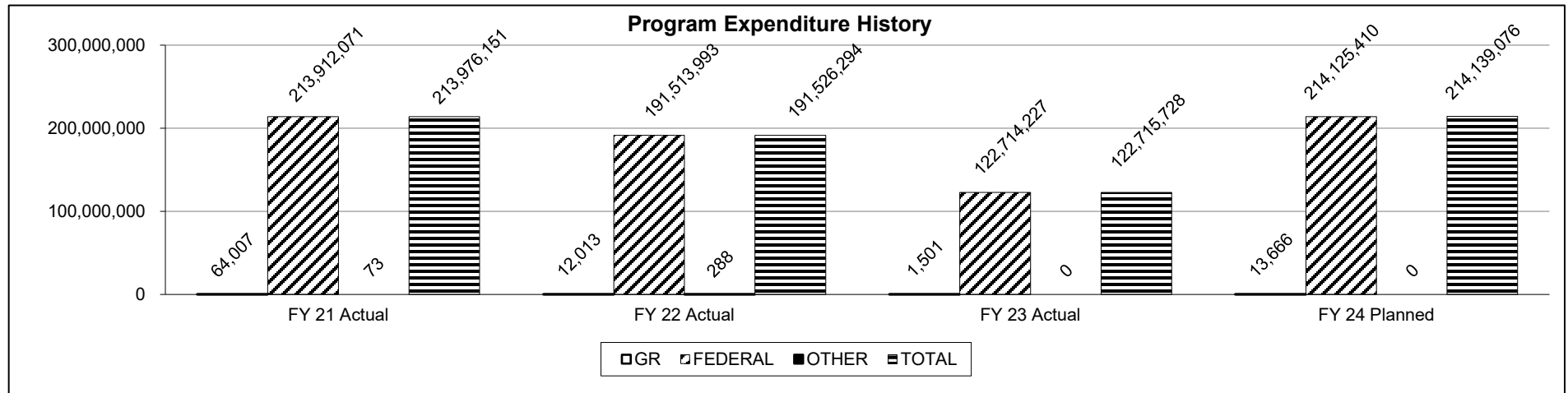
Department of Health and Senior Services

HB Section(s): 10.750

Nutrition Services

Program is found in the following core budget(s): Nutrition Services

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Health Initiative (0275).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

WIC: Child Nutrition Act of 1966, 42 U.S. Code Sections 1771, 1786, Healthy, Hunger-Free Kids Act of 2010; CACFP: Richard B Russell National School Lunch Act, 42 U.S. Code 1766, Section 17; Section 210.251, RSMo; SFSP: Richard B Russell National School Lunch Act, 42 U.S. Code 1761, Section 13; Section 191.810, RSMo; and CSFP: Farm Security and Rural Investment Act of 2002, 7 U.S. Code 612c; Section 208.603, RSMo.

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

Yes, these programs are required to be administered in every state and are 100 percent federally funded.

NEW DECISION ITEM

Health and Senior Services					Budget Unit 58590C				
Division of Community and Public Health									
Increase Nutrition Specialists Staffing DI# 1580014					HB Section 10.750				

1. AMOUNT OF REQUEST

FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	110,880	0	110,880	PS	0	110,880	0	110,880
EE	0	70,408	0	70,408	EE	0	70,408	0	70,408
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	181,288	0	181,288	Total	0	181,288	0	181,288
FTE	0.00	2.00	0.00	2.00	FTE	0.00	0.00	0.00	0.00

Est. Fringe	0	71,363	0	71,363	Est. Fringe	0	41,325	0	41,325
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Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Federal Funds: Department of Health and Senior Services Federal Fund (0143).

2. THIS REQUEST CAN BE CATEGORIZED AS:

<input type="checkbox"/> New Legislation	<input type="checkbox"/> New Program	<input type="checkbox"/> Fund Switch
<input type="checkbox"/> Federal Mandate	<input checked="" type="checkbox"/> Program Expansion	<input type="checkbox"/> Cost to Continue
<input type="checkbox"/> GR Pick-Up	<input type="checkbox"/> Space Request	<input type="checkbox"/> Equipment Replacement
<input type="checkbox"/> Pay Plan	<input type="checkbox"/> Other: _____	

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

This request for appropriation authority is for 2.00 Nutrition Specialist FTE positions for the United States Department of Agriculture (USDA) funded, Department-administered, Summer Food Service Program (SFSP), and the Child and Adult Care Food Program (CACFP) to ensure program continuity. These positions will perform monitoring, trainings, and provide technical assistance to sponsors and participating institutions. Prior to the summer of 2020, normal SFSP meal service operations required children to eat the meal and/or snack onsite in a congregate setting. Starting in summer 2023, the USDA issued permanent regulatory program changes to SFSP for states to begin operating non-congregate meal service in certain rural areas. Due to program changes, there is a significant and rapid growth of SFSP statewide. Ensuring program continuity will require increased Nutrition Specialist presence at program participant sites and increased monitoring reviews to ensure individual participants are not receiving the same meals from multiple sponsors, and that the meals are actually given to the intended recipients after pick up.

NEW DECISION ITEM

Health and Senior Services			Budget Unit <u>58590C</u>	
Division of Community and Public Health				
Increase Nutrition Specialists Staffing	DI# 1580014		HB Section	<u>10.750</u>

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

There are eight states in the USDA Mountain Plains Region: Colorado, Kansas, Missouri, Montana, Nebraska, North Dakota, South Dakota, and Wyoming. Missouri has the highest number of SFSP sponsors, yet has fewest staff in the field performing program monitoring, compared to the next largest state in the region. Colorado has 86 SFSP sponsors with 10 staff performing program monitoring; Missouri has 275 SFSP sponsors with 9 Nutrition Specialists performing program monitoring. Preceding the change in program regulation, the Department was at maximum capacity in being able to conduct monitoring reviews, provide training, and technical assistance. These changes will allow for SFSP program growth to continue and to expand the capacity of the Department's current Nutrition Specialists to conduct monitoring reviews, training, and technical assistance to sponsors and institutions.

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.

Budget Object Class/Job Class	Dept Req GR DOLLARS	Dept Req GR FTE	Dept Req FED DOLLARS	Dept Req FED FTE	Dept Req OTHER DOLLARS	Dept Req OTHER FTE	Dept Req TOTAL DOLLARS	Dept Req TOTAL FTE	Dept Req One-Time DOLLARS
Nutrition Specialist (05NT20)	0	0.00	110,880	2.00	0	0.00	110,880	2.00	0
Total PS	0	0.00	110,880	2.00	0	0.00	110,880	2.00	0
Travel (140)	0		13,073		0		13,073		0
Supplies (190)	0		8,947		0		8,947		0
Communication Services (340)	0		3,668		0		3,668		720
Professional Services (400)	0		10,621		0		10,621		0
M&R Services (430)	0		13,427		0		13,427		0
Computer Equipment (480)	0		3,672		0		3,672		3,672
Office Equipment (580)	0		17,000		0		17,000		17,000
Total EE	0		70,408		0		70,408		21,392
Grand Total	0	0.00	181,288	2.00	0	0.00	181,288	2.00	21,392

NEW DECISION ITEM

Health and Senior Services			Budget Unit 58590C						
Division of Community and Public Health									
Increase Nutrition Specialists Staffing		DI# 1580014	HB Section 10.750						
Budget Object Class/Job Class	Gov Rec GR DOLLARS	Gov Rec GR FTE	Gov Rec FED DOLLARS	Gov Rec FED FTE	Gov Rec OTHER DOLLARS	Gov Rec OTHER FTE	Gov Rec TOTAL DOLLARS	Gov Rec TOTAL FTE	Gov Rec One-Time DOLLARS
Nutrition Specialist (05NT20)	0	0.00	110,880	0.00	0	0.00	110,880	0.00	0
Total PS	0	0.00	110,880	0.00	0	0.00	110,880	0.00	0
Travel (140)	0		13,073		0		13,073		0
Supplies (190)	0		8,947		0		8,947		0
Communication Services (340)	0		3,668		0		3,668		720
Professional Services (400)	0		10,621		0		10,621		0
M&R Services (430)	0		13,427		0		13,427		0
Computer Equipment (480)	0		3,672		0		3,672		3,672
Office Equipment (580)	0		17,000		0		17,000		17,000
Total EE	0		70,408		0		70,408		21,392
Grand Total	0	0.00	181,288	0.00	0	0.00	181,288	0.00	21,392
6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional									
6a. Provide an activity measure for the program.									
The activity measure for this program is to increase the number of monitoring reviews performed as well as increase the number of onsite technical assistance visits provided.									
6b. Provide a measure of the program's quality.									
Increase in quality will be measured through an aggregate view of decreased serious findings during monitoring reviews.									
6c. Provide a measure(s) of the program's impact.									
The long term improvement of program management and increases in program best practices at the sponsor level will directly impact the nutritional quality of meals served to program participants statewide.									
6d. Provide a measure(s) of the program's efficiency.									
The program's efficiency will be the decrease in the average number of days from enrollment to technical assistance visit for new program sponsors and the increase in the frequency of monitoring and training.									
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:									
Not applicable.									

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
NUTRITION SERVICES								
Increase Nutrition Specialists - 1580014								
NUTRITION SPECIALIST	0	0.00	0	0.00	110,880	2.00	110,880	0.00
TOTAL - PS	0	0.00	0	0.00	110,880	2.00	110,880	0.00
TRAVEL, IN-STATE	0	0.00	0	0.00	10,238	0.00	10,238	0.00
SUPPLIES	0	0.00	0	0.00	896	0.00	896	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	720	0.00	720	0.00
M&R SERVICES	0	0.00	0	0.00	84	0.00	84	0.00
COMPUTER EQUIPMENT	0	0.00	0	0.00	3,672	0.00	3,672	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	17,000	0.00	17,000	0.00
TOTAL - EE	0	0.00	0	0.00	32,610	0.00	32,610	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$143,490	2.00	\$143,490	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$143,490	2.00	\$143,490	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
DIVISION OF ADMINISTRATION								
Increase Nutrition Specialists - 1580014								
TRAVEL, IN-STATE	0	0.00	0	0.00	2,835	0.00	2,835	0.00
SUPPLIES	0	0.00	0	0.00	8,051	0.00	8,051	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	2,948	0.00	2,948	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	10,621	0.00	10,621	0.00
M&R SERVICES	0	0.00	0	0.00	13,343	0.00	13,343	0.00
TOTAL - EE	0	0.00	0	0.00	37,798	0.00	37,798	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$37,798	0.00	\$37,798	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$37,798	0.00	\$37,798	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

CORE DECISION ITEM

Health and Senior Services					Budget Unit 58052C				
Community and Public Health									
Core - Rural Health and Primary Care Initiatives					HB Section 10.755				
1. CORE FINANCIAL SUMMARY									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	110,118	218,267	209,851	538,236	PS	110,118	218,267	116,412	444,797
EE	0	93,713	747,952	841,665	EE	0	93,713	747,952	841,665
PSD	4,000,000	1,617,068	1,607,188	7,224,256	PSD	4,000,000	1,617,068	1,607,188	7,224,256
TRF	0	0	0	0	TRF	0	0	0	0
Total	4,110,118	1,929,048	2,564,991	8,604,157	Total	4,110,118	1,929,048	2,471,552	8,510,718
FTE	1.61	2.53	3.92	8.06	FTE	1.61	2.53	1.92	6.06
Est. Fringe	65,222	119,346	137,086	321,654	Est. Fringe	65,222	119,346	72,223	256,791
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.				
Federal Funds: Department of Health and Senior Services Federal (0143).									
Other Funds: Health Initiatives (0275); Health Access Incentives (0276), Professional and Practical Nursing Student Loan (0565), and Department of Health and Senior Services-Donated (0658).									

CORE DECISION ITEM

Health and Senior Services	Budget Unit 58052C
Community and Public Health	
Core - Rural Health and Primary Care Initiatives	HB Section 10.755
2. CORE DESCRIPTION	
<p>The Office of Rural Health and Primary Care (ORHPC), comprised of the State Office of Rural Health (SORH) and the Primary Care Office (PCO), enhances equitable access to health care services to rural and underserved populations and communities to improve the health status of these Missouri residents. ORHPC does this by working closely with local health advocates, associations, universities, hospitals and clinics, and providers on a variety of community development activities and providing resources and leadership for health care access initiatives.</p> <p>SORH provides leadership in the development and coordination of rural health initiatives to support, strengthen, and improve rural health care. Activities include acting as a central location for the collection and dissemination of information related to rural health care issues, research findings related to rural health, and innovative health care delivery approaches; monitoring, coordinating, and facilitating rural health efforts with a focus on avoiding duplication and inefficiencies; and providing technical assistance to rural health stakeholders to support their efforts. Additionally, SORH seeks to promote and develop diverse and innovative health care service models, educate and recommend appropriate public policies to ensure the viability of rural health care delivery. Programs and contracts include providing rural health clinics with trainings and webinars to become Patient Centered Medical Home accredited and the Rural Track Pipeline Program, which establishes rural training sites, identifies and develops community based faculty preceptors, recruits rural students into health care professions, and collaborates with other state and national leaders to promote the advancement of rural health care.</p> <p>PCO works to improve primary care service delivery, conduct a health provider needs assessment, manage health professional shortage designation, and address workforce availability to meet the needs of underserved populations. The PCO partners with federal and state programs, communities, private entities, health care facilities, and providers to assess, develop, and expand comprehensive, community-based primary health care services. The PCO manages multiple programs, including Missouri's J-1 Visa, National Interest Waiver (NIW), and health professional loan repayment programs; helping to recruit and retain health professionals in underserved communities; and collaborating and providing technical assistance to support improved access to primary care services. PCO also administers the Rural Physician Grant Program awarding funding to primary care physicians to relocate to HPSA in exchange for a five-year service obligation and the Missouri Graduate Medical Education Grant Program established in FY 2024 to increase primary care residency slots available in Missouri.</p>	
3. PROGRAM LISTING (list programs included in this core funding)	
Faculty Preceptors Tax Credit Program	Rural Health Promotion
Health Professional Shortage Areas	Small Rural Hospital Improvement Program (SHIP)
J-1 Visa/State 30 Waiver Program	State Office of Primary Care
Medicare Rural Hospital Flexibility Program (FLEX)	State Office of Rural Health Grant (SORH)
National Interest Waiver	Rural Healthcare Provider Transition Project
Missouri Graduate Medical Education Grant Program (GME)	Rural Health Blog
Health Professional Loan Repayment Program (HPLRP)	

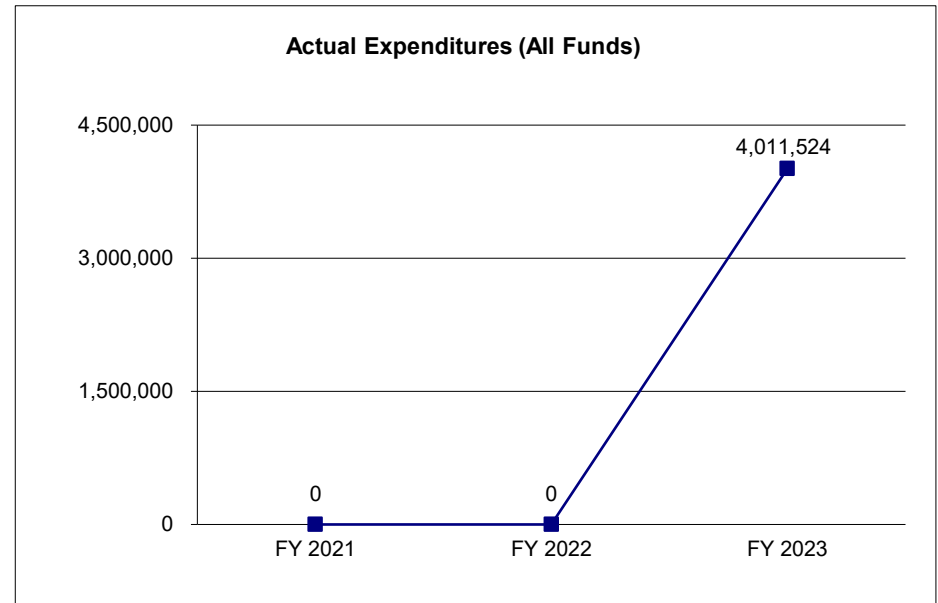
CORE DECISION ITEM

Health and Senior Services
Community and Public Health
Core - Rural Health and Primary Care Initiatives

Budget Unit	58052C
HB Section	10.755

4. FINANCIAL HISTORY

	FY 2021 Actual	FY 2022 Actual	FY 2023 Actual	FY 2024 Current Yr.
Appropriation (All Funds)	0	0	5,084,735	8,604,156
Less Reverted (All Funds)	0	0	(24,647)	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	0	0	5,060,088	8,604,156
Actual Expenditures (All Funds)	0	0	4,011,524	N/A
Unexpended (All Funds)	0	0	1,048,564	N/A
Unexpended, by Fund:				
General Revenue	0	0	161,178	N/A
Federal	0	0	574,790	N/A
Other	0	0	312,596	N/A



Reverted includes the statutory three percent reserve amount (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES RURAL HLTH PRIMARY CARE INIT

5. CORE RECONCILIATION DETAIL

				Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS										
Core Reallocation	881	5726	PS		2.53	0	218,267	0	218,267	CORE reallocations for programmatic alignment.
Core Reallocation	881	5724	PS		1.00	63,999	0	0	63,999	CORE reallocations for programmatic alignment.
Core Reallocation	881	5733	PS		1.92	0	0	116,412	116,412	CORE reallocations for programmatic alignment.
Core Reallocation	881	5756	PS		2.00	0	0	93,439	93,439	CORE reallocations for programmatic alignment.
Core Reallocation	881	5081	PS		0.61	46,119	0	0	46,119	CORE reallocations for programmatic alignment.
Core Reallocation	881	5743	EE		0.00	0	0	650,000	650,000	CORE reallocations for programmatic alignment.
Core Reallocation	881	5759	EE		0.00	0	0	75,000	75,000	CORE reallocations for programmatic alignment.
Core Reallocation	881	5742	EE		0.00	0	0	14,184	14,184	CORE reallocations for programmatic alignment.
Core Reallocation	881	5757	EE		0.00	0	0	8,768	8,768	CORE reallocations for programmatic alignment.
Core Reallocation	881	5727	EE		0.00	0	93,713	0	93,713	CORE reallocations for programmatic alignment.
Core Reallocation	881	5722	PD		0.00	200,000	0	0	200,000	CORE reallocations for programmatic alignment.
Core Reallocation	881	5758	PD		0.00	0	0	650,000	650,000	CORE reallocations for programmatic alignment.
Core Reallocation	881	5759	PD		0.00	0	0	956,790	956,790	CORE reallocations for programmatic alignment.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES RURAL HLTH PRIMARY CARE INIT

5. CORE RECONCILIATION DETAIL

				Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS										
Core Reallocation	881	5757	PD		0.00	0	0	132	132	CORE reallocations for programmatic alignment.
Core Reallocation	881	5721	PD		0.00	1,500,000	0	0	1,500,000	CORE reallocations for programmatic alignment.
Core Reallocation	881	5742	PD		0.00	0	0	266	266	CORE reallocations for programmatic alignment.
Core Reallocation	881	5731	PD		0.00	0	425,000	0	425,000	CORE reallocations for programmatic alignment.
Core Reallocation	881	5729	PD		0.00	0	1,192,068	0	1,192,068	CORE reallocations for programmatic alignment.
Core Reallocation	881	5725	PD		0.00	2,300,000	0	0	2,300,000	CORE reallocations for programmatic alignment.
NET DEPARTMENT CHANGES					8.06	4,110,118	1,929,048	2,564,991	8,604,157	
DEPARTMENT CORE REQUEST										
			PS		8.06	110,118	218,267	209,851	538,236	
			EE		0.00	0	93,713	747,952	841,665	
			PD		0.00	4,000,000	1,617,068	1,607,188	7,224,256	
			Total		8.06	4,110,118	1,929,048	2,564,991	8,604,157	
GOVERNOR'S ADDITIONAL CORE ADJUSTMENTS										
Core Reduction	2269	5756	PS		(2.00)	0	0	(93,439)	(93,439)	Fund swap to GR.
NET GOVERNOR CHANGES					(2.00)	0	0	(93,439)	(93,439)	
GOVERNOR'S RECOMMENDED CORE										
			PS		6.06	110,118	218,267	116,412	444,797	
			EE		0.00	0	93,713	747,952	841,665	

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES
RURAL HLTH PRIMARY CARE INIT

5. CORE RECONCILIATION DETAIL

	Budget Class	FTE	GR	Federal	Other	Total	Explanation
GOVERNOR'S RECOMMENDED CORE							
	PD	0.00	4,000,000	1,617,068	1,607,188	7,224,256	
	Total	6.06	4,110,118	1,929,048	2,471,552	8,510,718	

DECISION ITEM SUMMARY

Budget Unit								
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
RURAL HLTH PRIMARY CARE INIT								
CORE								
PERSONAL SERVICES								
GENERAL REVENUE	0	0.00	0	0.00	110,118	1.61	110,118	1.61
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	218,267	2.53	218,267	2.53
HEALTH INITIATIVES	0	0.00	0	0.00	116,412	1.92	116,412	1.92
PROF & PRACT NURSING LOANS	0	0.00	0	0.00	93,439	2.00	0	0.00
TOTAL - PS	0	0.00	0	0.00	538,236	8.06	444,797	6.06
EXPENSE & EQUIPMENT								
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	93,713	0.00	93,713	0.00
HEALTH INITIATIVES	0	0.00	0	0.00	14,184	0.00	14,184	0.00
HEALTH ACCESS INCENTIVE	0	0.00	0	0.00	650,000	0.00	650,000	0.00
PROF & PRACT NURSING LOANS	0	0.00	0	0.00	8,768	0.00	8,768	0.00
DEPT OF HEALTH-DONATED	0	0.00	0	0.00	75,000	0.00	75,000	0.00
TOTAL - EE	0	0.00	0	0.00	841,665	0.00	841,665	0.00
PROGRAM-SPECIFIC								
GENERAL REVENUE	0	0.00	0	0.00	4,000,000	0.00	4,000,000	0.00
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	1,617,068	0.00	1,617,068	0.00
HEALTH INITIATIVES	0	0.00	0	0.00	266	0.00	266	0.00
PROF & PRACT NURSING LOANS	0	0.00	0	0.00	650,132	0.00	650,132	0.00
DEPT OF HEALTH-DONATED	0	0.00	0	0.00	956,790	0.00	956,790	0.00
TOTAL - PD	0	0.00	0	0.00	7,224,256	0.00	7,224,256	0.00
TOTAL	0	0.00	0	0.00	8,604,157	8.06	8,510,718	6.06
Pay Plan - 0000012								
PERSONAL SERVICES								
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	13,935	0.00
HEALTH INITIATIVES	0	0.00	0	0.00	0	0.00	3,726	0.00
TOTAL - PS	0	0.00	0	0.00	0	0.00	17,661	0.00
TOTAL	0	0.00	0	0.00	0	0.00	17,661	0.00
HPLRP FTE - 1580005								
PERSONAL SERVICES								

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DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
RURAL HLTH PRIMARY CARE INIT									
HPLRP FTE - 1580005									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	107,154	2.00	107,154	2.00	
TOTAL - PS	0	0.00	0	0.00	107,154	2.00	107,154	2.00	
EXPENSE & EQUIPMENT									
GENERAL REVENUE	0	0.00	0	0.00	8,900	0.00	8,900	0.00	
TOTAL - EE	0	0.00	0	0.00	8,900	0.00	8,900	0.00	
TOTAL	0	0.00	0	0.00	116,054	2.00	116,054	2.00	
HPLRP Program - 1580018									
PROGRAM-SPECIFIC									
GENERAL REVENUE	0	0.00	0	0.00	3,090,000	0.00	0	0.00	
TOTAL - PD	0	0.00	0	0.00	3,090,000	0.00	0	0.00	
TOTAL	0	0.00	0	0.00	3,090,000	0.00	0	0.00	
Graduate Medical Education - 1580024									
EXPENSE & EQUIPMENT									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	3,502,000	0.00	
TOTAL - EE	0	0.00	0	0.00	0	0.00	3,502,000	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	3,502,000	0.00	
Behavioral Health GME - 1580030									
EXPENSE & EQUIPMENT									
OPIOID TREATMENT AND RECOVERY	0	0.00	0	0.00	0	0.00	4,512,500	0.00	
TOTAL - EE	0	0.00	0	0.00	0	0.00	4,512,500	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	4,512,500	0.00	
GRAND TOTAL	\$0	0.00	\$0	0.00	\$11,810,211	10.06	\$16,658,933	8.06	

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58052C BUDGET UNIT NAME: Rural Health and Primary Care Initiatives HOUSE BILL SECTION: 10.755	DEPARTMENT: Department of Health and Senior Services (DHSS) DIVISION: Division of Community and Public Health (DCPH)
1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.	
DEPARTMENT REQUEST	
DHSS has worked to create and breakdown CORES within DCPH in order to align the budget structure with the division's operations. The Department requests fifty percent (50%) flexibility between House Bills 10.700, 10.705, 10.710, 10.715, 10.720, 10.725, 10.730, 10.735, 10.740, 10.745, 10.750, 10.755, 10.760, 10.765, 10.770, and 10.775 in order to ensure continuity of operations during the transition.	
2. Estimate how much flexibility will be used for the budget year. How much flexibility was used in the Prior Year Budget and the Current Year Budget? Please specify the amount.	
PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT YEAR ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
Not applicable.	Not applicable.
BUDGET REQUEST ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED	
Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of Governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The Department's requested flex will allow the Department to utilize available resources in the most effective manner as the need arises. Flexibility (50%) between House bill sections will allow for continuity of operations as DCPH continues to align budget structure with its operating structure. The Department cannot predict how much flexibility will be utilized.	
3. Please explain how flexibility was used in the prior and/or current years.	
PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
Not applicable.	Not applicable.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
RURAL HLTH PRIMARY CARE INIT								
CORE								
PROJECT SPECIALIST	0	0.00	0	0.00	100,454	1.19	100,454	1.19
SPECIAL ASST PROFESSIONAL	0	0.00	0	0.00	22,628	0.10	22,628	0.10
HEALTH PROGRAM AIDE	0	0.00	0	0.00	14,234	0.15	14,234	0.15
LEAD ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	7,155	0.15	7,155	0.15
SENIOR PROGRAM SPECIALIST	0	0.00	0	0.00	18,156	0.25	18,156	0.25
ASSOC RESEARCH/DATA ANALYST	0	0.00	0	0.00	13,658	0.25	13,658	0.25
PUBLIC HEALTH PROGRAM ASSOC	0	0.00	0	0.00	101,611	2.14	8,172	0.14
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	91,778	1.48	91,778	1.48
SR PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	123,031	1.81	123,031	1.81
PUBLIC HEALTH PROGRAM MANAGER	0	0.00	0	0.00	45,531	0.54	45,531	0.54
TOTAL - PS	0	0.00	0	0.00	538,236	8.06	444,797	6.06
TRAVEL, IN-STATE	0	0.00	0	0.00	5,398	0.00	5,398	0.00
TRAVEL, OUT-OF-STATE	0	0.00	0	0.00	6,437	0.00	6,437	0.00
FUEL & UTILITIES	0	0.00	0	0.00	183	0.00	183	0.00
SUPPLIES	0	0.00	0	0.00	49,675	0.00	49,675	0.00
PROFESSIONAL DEVELOPMENT	0	0.00	0	0.00	16,561	0.00	16,561	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	2,497	0.00	2,497	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	755,284	0.00	755,284	0.00
HOUSEKEEPING & JANITORIAL SERV	0	0.00	0	0.00	519	0.00	519	0.00
M&R SERVICES	0	0.00	0	0.00	2,915	0.00	2,915	0.00
COMPUTER EQUIPMENT	0	0.00	0	0.00	284	0.00	284	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	11	0.00	11	0.00
OTHER EQUIPMENT	0	0.00	0	0.00	420	0.00	420	0.00
BUILDING LEASE PAYMENTS	0	0.00	0	0.00	1,091	0.00	1,091	0.00
EQUIPMENT RENTALS & LEASES	0	0.00	0	0.00	136	0.00	136	0.00
MISCELLANEOUS EXPENSES	0	0.00	0	0.00	254	0.00	254	0.00
TOTAL - EE	0	0.00	0	0.00	841,665	0.00	841,665	0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
RURAL HLTH PRIMARY CARE INIT								
CORE								
PROGRAM DISTRIBUTIONS	0	0.00	0	0.00	7,224,256	0.00	7,224,256	0.00
TOTAL - PD	0	0.00	0	0.00	7,224,256	0.00	7,224,256	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$8,604,157	8.06	\$8,510,718	6.06
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$4,110,118	1.61	\$4,110,118	1.61
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$1,929,048	2.53	\$1,929,048	2.53
OTHER FUNDS	\$0	0.00	\$0	0.00	\$2,564,991	3.92	\$2,471,552	1.92

PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.755</u>
Rural Health and Primary Care Initiatives	
Program is found in the following core budget(s): Rural Health and Primary Care Initiatives	
<p>1a. What strategic priority does this program address?</p> <p>Build and Strengthen Partnerships, Use Clear and Consistent Communication to Build Trust, Expand Access to Services, Re-envision and Strengthen Workforce and</p> <p>1b. What does this program do?</p> <p>The Office of Rural Health and Primary Care (ORHPC), comprised of the State Office of Rural Health (SORH) and the Primary Care Office (PCO), enhances access to health care services to rural and underserved populations and communities to improve the health status of Missouri residents. ORHPC does this by working closely with local health advocates, associations, universities, hospitals and clinics, and providers a variety of community development activities and provides resources and leadership for health care access initiatives.</p> <p>SORH provides leadership in the development and coordination of rural health initiatives to support, strengthen, and improve rural health care. Activities include acting as a central location for the collection and dissemination of information related to rural health care issues, research findings related to rural health, and innovative health care delivery approaches; monitoring, coordinating, and facilitating rural health efforts with a focus on avoiding duplication and inefficiencies; and providing technical assistance to rural health stakeholders to support their efforts. Additionally, SORH seeks to promote and develop diverse and innovative health care service models, educate and recommend appropriate public policies to ensure the viability of rural health care delivery. Programs and contracts include providing rural health clinics with trainings and webinars to become Patient Centered Medical Home accredited and the Rural Track Pipeline Program, which establishes rural training sites, identifies and develops community based faculty preceptors, recruits rural students into health care professions, and collaborates with other state and national leaders to promote the advancement of rural health care.</p> <p>PCO works to improve primary care service delivery, conduct a health provider needs assessment, manage health professional shortage designation, and address workforce availability to meet the needs of underserved populations. The PCO partners with federal and state programs, communities, private entities, health care facilities, and providers to assess, develop, and expand comprehensive, community-based primary health care services. PCO manages multiple programs, including Missouri's J-1 Visa, National Interest Waiver (NIW), and health professional loan repayment programs; helping to recruit and retain health professionals in underserved communities; and collaborating and providing technical assistance to support improved access to primary care services. PCO also administers the Rural Physician Grant Program awarding funding to primary care physicians to relocate to a Health Professional Shortage Area (HPSA) in exchange for a five-year service obligation and the Missouri Graduate Medical Education Grant Program established in FY24 to increase primary care residency slots available in Missouri.</p>	

PROGRAM DESCRIPTION

Health and Senior Services

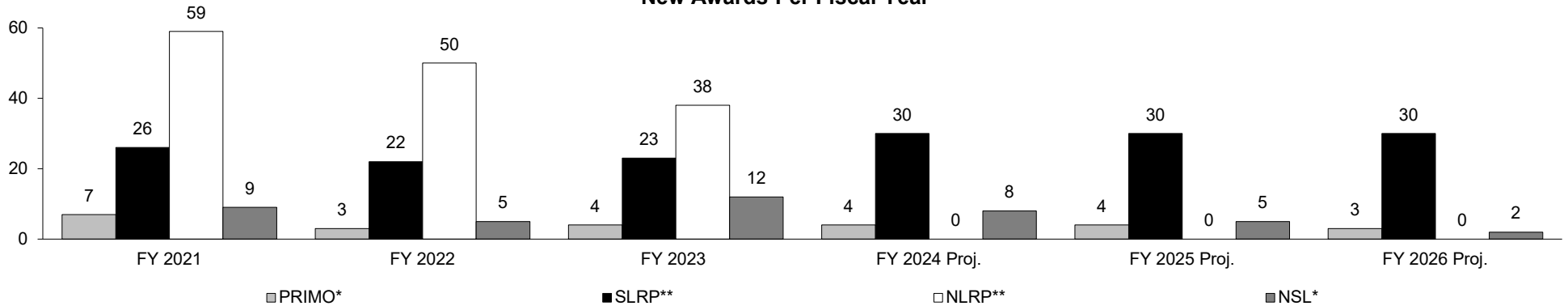
HB Section(s): 10.755

Rural Health and Primary Care Initiatives

Program is found in the following core budget(s): Rural Health and Primary Care Initiatives

2a. Provide an activity measure(s) for the program.

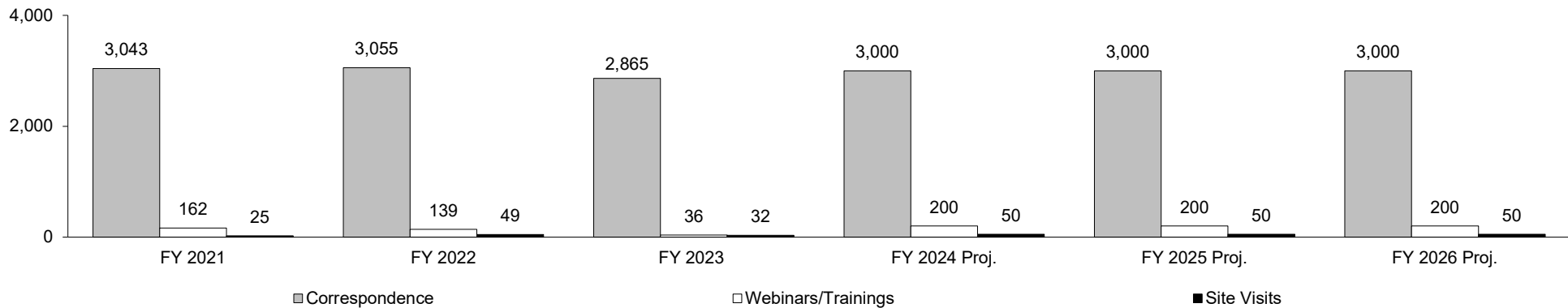
New Awards Per Fiscal Year



*Student Loan Program = eligible medical or nursing student; payments are applied to qualifying educational costs (tuition, supplies, living expenses, etc.).

**Repayment Program = eligible medical or nursing professional licensed practitioner completed degree coursework; payments are applied to qualified educational loans.

Technical Assistance Provided by ORHPC



Technical Assistance includes correspondence via email, phone, and letters; webinars/trainings; and site visits regarding grant application review, invoice assistance, financial and operational assistance, and sharing information and resources.

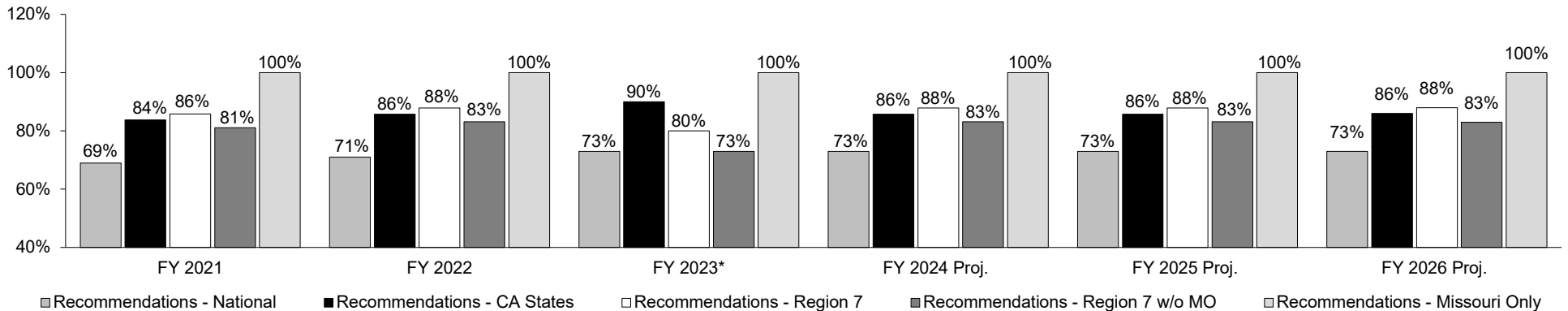
PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): 10.755
Rural Health and Primary Care Initiatives	
Program is found in the following core budget(s): Rural Health and Primary Care Initiatives	
2b. Provide a measure(s) of the program's quality.	

Loan Recipient Service Obligation Status Per Fiscal Year												
Program	FY 2021			FY 2022			FY 2023			FY 2024 Proj.		
	Active Loan Recipients Serving Their Obligation During FY	Loan Recipients Completed Service Obligation During FY	Loan Recipients Defaulted During FY	Active Loan Recipients Serving Their Obligation During FY	Loan Recipients Completed Service Obligation During FY	Loan Recipients Defaulted During FY	Active Loan Recipients Serving Their Obligation During FY	Loan Recipients Completed Service Obligation During FY	Loan Recipients Defaulted During FY	Active Loan Recipients Serving Their Obligation During FY	Loan Recipients Completed Service Obligation During FY	Loan Recipients Defaulted During FY
PRIMO	15	6	0	30	10	0	35	10	0	12	5	0
SLRP	68	8	0	70	30	0	70	60	0	45	20	0
NLRP	64	24	0	92	40	0	87	50	0	99	61	0
NSL	38	14	4	40	30	0	40	30	0	10	6	0

As of FY 2024, ORHPC is no longer funding new NLRP awards and will only be funding NSL and PRIMO awards for those who received awards in FY 2023, to ensure they are funded through graduation. Recipients serving their obligation during the FY does not include those awarded in that FY as their contract service obligation starts on July 1 of the following FY.

J-1 Visa Conrad State 30 Waiver Recommendation Slots Filled Per Fiscal Year



Percentages of J-1 Visa Conrad 30 Waiver slot recommendations were made for the following areas: Nationally, Contiguous Area (CA) states for Missouri (Nebraska, Iowa, Kansas, Illinois, Arkansas, Oklahoma, Kentucky, and Tennessee), Region 7 as a whole (Missouri, Nebraska, Kansas and Iowa), Region 7 without Missouri, and Missouri only.

*FY 2023 data is not available for all states currently; however, data for Missouri is accurate.

PROGRAM DESCRIPTION

Health and Senior Services

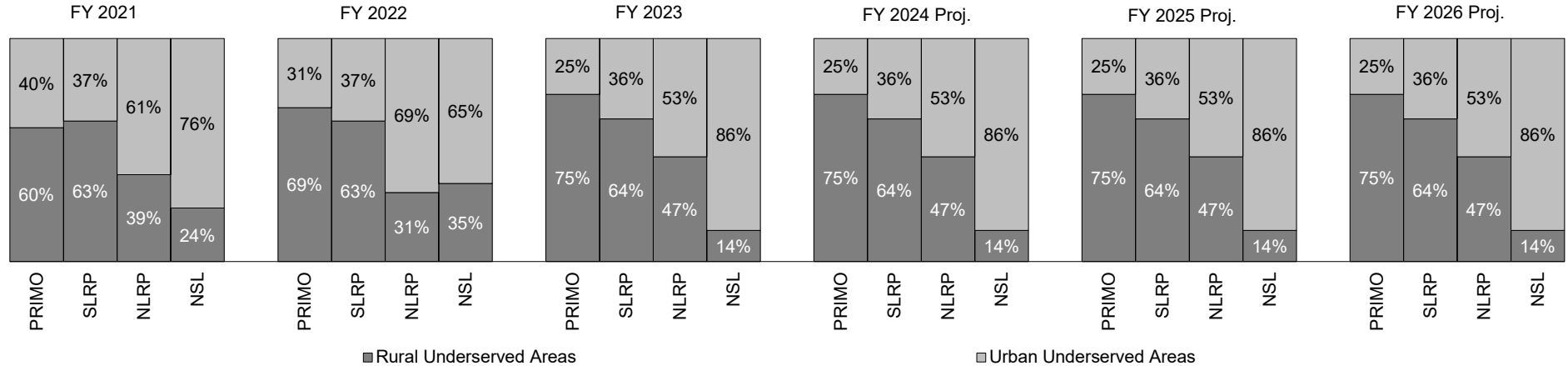
HB Section(s): 10.755

Rural Health and Primary Care Initiatives

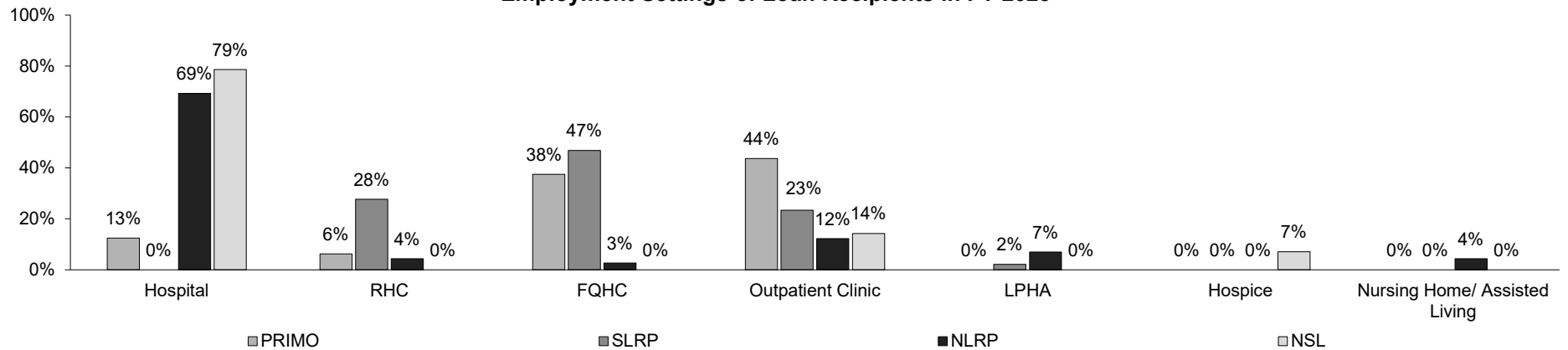
Program is found in the following core budget(s): Rural Health and Primary Care Initiatives

2c. Provide a measure(s) of the program's impact.

Loan Repayment Program by Geographic Working Location



Employment Settings of Loan Recipients in FY 2023



RHC-Rural Health Clinic; FQHC-Federally Qualified Health Clinic; LPHA-Local Public Health Agency.

PROGRAM DESCRIPTION

Health and Senior Services

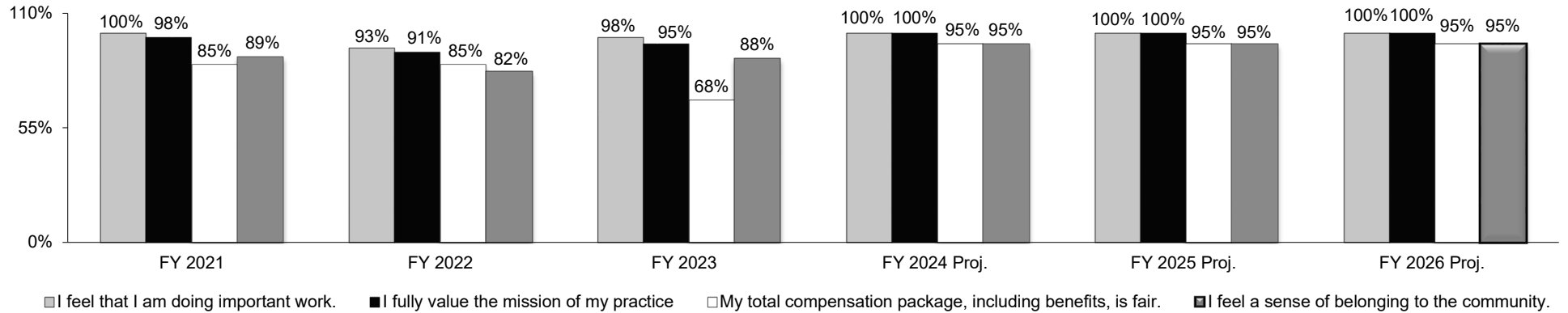
HB Section(s): 10.755

Rural Health and Primary Care Initiatives

Program is found in the following core budget(s): Rural Health and Primary Care Initiatives

2c. Provide a measure(s) of the program's impact. (continued)

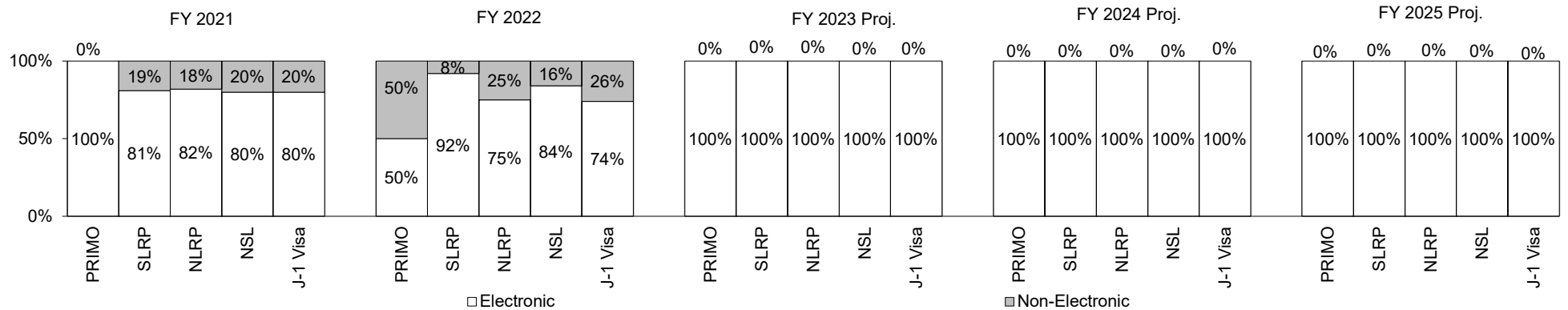
Reasons Clinicians Continue to Practice in Rural Areas



Data for Clinician Satisfaction and Retention acquired from Practice Sights Retention Collaborative and Data Management System.

2d. Provide a measure(s) of the program's efficiency.

Loan Repayment Program Application Submission Type



In FY 2021 ORHPC implemented an electronic application submission option. Electronic submission includes applications received via an electronic system, email, or facsimile. Non-Electronic submission includes mail submissions.

PROGRAM DESCRIPTION

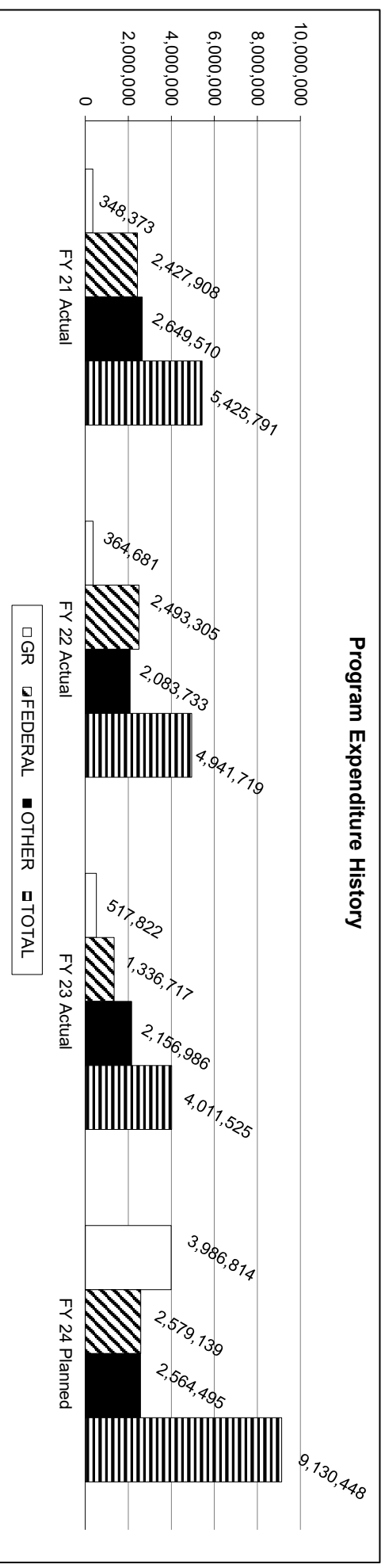
Health and Senior Services

HB Section(s): 10.755

Rural Health and Primary Care Initiatives

Program is found in the following core budget(s): Rural Health and Primary Care Initiatives

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Health Initiatives (0275), Health Access Incentive (0276), Professional and Practical Nursing Student Loan and Nurse Loan Repayment (0565), and Department of Health and Senior Services - Donated (0658).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Section 191.411, RSMo (PRIMO); Section 191.500, RSMo (Student Loans); Section 191.600, RSMo (Loan Repayment Program); Section 192.604, RSMo (Office of Rural Health); Section 335.212, RSMo (Nurse Loan Program); Section 335.245, RSMo (Nurse Loan Repayment Program); and Section 333(D), Public Health Service (PHS) Act (Primary Care Office).

6. Are there federal matching requirements? If yes, please explain.

Yes, the State Office of Rural Health requires a three dollar state to one dollar federal match.

7. Is this a federally mandated program? If yes, please explain.
No.

NEW DECISION ITEM

Health and Senior Services					Budget Unit 58052C				
Division of Community and Public Health									
HPLRP FTE DI# 1580005					HB Section 10.755				
1. AMOUNT OF REQUEST									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	107,154	0	0	107,154	PS	107,154	0	0	107,154
EE	8,900	0	0	8,900	EE	8,900	0	0	8,900
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	116,054	0	0	116,054	Total	116,054	0	0	116,054
FTE	2.00	0.00	0.00	2.00	FTE	2.00	0.00	0.00	2.00
Est. Fringe	69,974	0	0	69,974	Est. Fringe	69,974	0	0	69,974
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				
2. THIS REQUEST CAN BE CATEGORIZED AS:									
<input type="checkbox"/> New Legislation		<input type="checkbox"/> New Program		<input checked="" type="checkbox"/> Fund Switch					
<input type="checkbox"/> Federal Mandate		<input type="checkbox"/> Program Expansion		<input type="checkbox"/> Cost to Continue					
<input type="checkbox"/> GR Pick-Up		<input type="checkbox"/> Space Request		<input type="checkbox"/> Equipment Replacement					
<input type="checkbox"/> Pay Plan		<input type="checkbox"/> Other: _____							
3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.									
This funding request is for General Revenue funding for the Health Professional Loan Repayment Program (HPLRP) to support 2.00 FTE that are necessary to operate the program. In 2023, Missouri enacted legislation to move nurse loan funds out of DHSS budget. At that time, funding was received for loan repayment awards, but no funds were issued for operation of the program. These positions are filled and required for the on-going programmatic duties.									

NEW DECISION ITEM

Health and Senior Services				Budget Unit <u>58052C</u>					
Division of Community and Public Health									
HPLRP FTE		DI# 1580005		HB Section		<u>10.755</u>			

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

Based on DHSS experience with administering loan and loan repayment programs, 2.00 FTE are necessary to appropriately facilitate and maintain this new program. These individuals will be primarily tasked with reviewing and awarding applicants and monitoring the contractual compliance for each awardee, along with other administrative duties relevant to normal program operations. The funding requested is applicable to the normal salary and expenses of 2 Public Health Program Specialists.

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.

Budget Object Class/Job Class	Dept Req GR DOLLARS	Dept Req GR FTE	Dept Req FED DOLLARS	Dept Req FED FTE	Dept Req OTHER DOLLARS	Dept Req OTHER FTE	Dept Req TOTAL DOLLARS	Dept Req TOTAL FTE	Dept Req One-Time DOLLARS
Public Health Program Specialist (19PH20)	107,154	2.00	0	0.00	0	0.00	107,154	2.00	0
Total PS	107,154	2.00	0	0.00	0	0.00	107,154	2.00	0
Supplies (190)	8,900		0		0		8,900		0
Total EE	8,900		0		0		8,900		0
Grand Total	116,054	2.00	0	0.00	0	0.00	116,054	2.00	0

Budget Object Class/Job Class	Gov Rec GR DOLLARS	Gov Rec GR FTE	Gov Rec FED DOLLARS	Gov Rec FED FTE	Gov Rec OTHER DOLLARS	Gov Rec OTHER FTE	Gov Rec TOTAL DOLLARS	Gov Rec TOTAL FTE	Gov Rec One-Time DOLLARS
Public Health Program Specialist (19PH20)	107,154	2.00	0	0.00	0	0.00	107,154	2.00	0
Total PS	107,154	2.00	0	0.00	0	0.00	107,154	2.00	0
Supplies (190)	8,900		0		0		8,900		0
Total EE	8,900		0		0		8,900		0
Grand Total	116,054	2.00	0	0.00	0	0.00	116,054	2.00	0

NEW DECISION ITEM

Health and Senior Services	Budget Unit <u>58052C</u>
Division of Community and Public Health	
HPLRP FTE DI# 1580005	HB Section <u>10.755</u>
6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)	
6a. Provide an activity measure(s) for the program. The program's activity measure will include the number of new loans awarded per fiscal year.	
6b. Provide a measure(s) of the program's quality. The quality measure for this program will be measured by the loan recipient services obligation status such as where recipients are serving their obligation.	
6c. Provide a measure(s) of the program's impact. The program's impact will be measured by determining loan recipient's geographic location.	
6d. Provide a measure(s) of the program's efficiency. The efficiency of this program will be measured by the number of loan recipients who continue to practice in rural areas.	
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:	
The program will ensure promotion of HPLRP to assist with receiving an adequate number of applicants. The program will require employment verification annually to ensure the geographic location and that the applicant is providing services in the impacted areas.	

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
RURAL HLTH PRIMARY CARE INIT								
HPLRP FTE - 1580005								
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	107,154	2.00	107,154	2.00
TOTAL - PS	0	0.00	0	0.00	107,154	2.00	107,154	2.00
SUPPLIES	0	0.00	0	0.00	8,900	0.00	8,900	0.00
TOTAL - EE	0	0.00	0	0.00	8,900	0.00	8,900	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$116,054	2.00	\$116,054	2.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$116,054	2.00	\$116,054	2.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

NEW DECISION ITEM

Health and Senior Services					Budget Unit <u>58052C</u>				
Division of Community and Public Health									
Health Professional Loan Repayment Program DI# 1580018					HB Section <u>10.755</u>				
1. AMOUNT OF REQUEST									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	3,090,000	0	0	3,090,000	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	3,090,000	0	0	3,090,000	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				
2. THIS REQUEST CAN BE CATEGORIZED AS:									
<input type="checkbox"/> New Legislation		<input checked="" type="checkbox"/> New Program		<input type="checkbox"/> Fund Switch					
<input type="checkbox"/> Federal Mandate		<input type="checkbox"/> Program Expansion		<input type="checkbox"/> Cost to Continue					
<input type="checkbox"/> GR Pick-Up		<input type="checkbox"/> Space Request		<input type="checkbox"/> Equipment Replacement					
<input type="checkbox"/> Pay Plan		Other: _____							
3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.									
<p>This funding request is for additional General Revenue funding to increase the number of loan repayment awards for health care, mental health, and public health professionals for the Health Professional Loan Repayment Program (HPLRP).</p> <p>In 2023, Missouri enacted legislation to establish the Health Professional Loan Repayment Program and end the Primary Care Resource Initiative for Missouri (PRIMO). The Department is requesting the increase to meet the legislative requirements implemented in the new HPLRP by adding sufficient funding to support the inclusion of additional health practitioners and public health professionals. Increasing the awards for loan repayment will increase access to quality health care in parts of Missouri where a shortage of healthcare providers makes it difficult for low-income, uninsured, and geographically isolated Missourians to receive healthcare in multiple health practice areas.</p>									

NEW DECISION ITEM

Health and Senior Services				Budget Unit <u>58052C</u>					
Division of Community and Public Health									
Health Professional Loan Repayment Program DI# 1580018				HB Section <u>10.755</u>					

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The HPLRP addresses the needs in Health Professional Shortage Areas (HPSAs) by providing repayment loans to health care, mental health, and public health professionals who agree to work in an area of defined need for a specified period of time. If the professional does not meet these requirements, then the remaining funds must be paid back to the Department. To account for the Governor Reserve, the amounts requested have been adjusted accordingly.

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.

Budget Object Class/Job Class	Dept Req GR DOLLARS	Dept Req GR FTE	Dept Req FED DOLLARS	Dept Req FED FTE	Dept Req OTHER DOLLARS	Dept Req OTHER FTE	Dept Req TOTAL DOLLARS	Dept Req TOTAL FTE	Dept Req One-Time DOLLARS
Program Distributions (800)	3,090,000		0		0		3,090,000		0
Total PSD	<u>3,090,000</u>		<u>0</u>		<u>0</u>		<u>3,090,000</u>		<u>0</u>
Grand Total	<u><u>3,090,000</u></u>	<u>0.00</u>	<u>0</u>	<u>0.00</u>	<u>0</u>	<u>0.00</u>	<u>3,090,000</u>	<u>0.00</u>	<u>0</u>

Budget Object Class/Job Class	Gov Rec GR DOLLARS	Gov Rec GR FTE	Gov Rec FED DOLLARS	Gov Rec FED FTE	Gov Rec OTHER DOLLARS	Gov Rec OTHER FTE	Gov Rec TOTAL DOLLARS	Gov Rec TOTAL FTE	Gov Rec One-Time DOLLARS
Program Distributions (800)							0		
Total PSD	<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>
Grand Total	<u><u>0</u></u>	<u>0.0</u>	<u>0</u>	<u>0.0</u>	<u>0</u>	<u>0.0</u>	<u>0</u>	<u>0.0</u>	<u>0</u>

NEW DECISION ITEM

Health and Senior Services		Budget Unit	<u>58052C</u>
Division of Community and Public Health			
Health Professional Loan Repayment Program	DI# 1580018	HB Section	<u>10.755</u>
6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)			
6a. Provide an activity measure(s) for the program. The program's activity measure will include the number of new loans awarded per fiscal year.			
6b. Provide a measure(s) of the program's quality. The quality measure for this program will be measured by the loan recipient services obligation status such as where recipients are serving their obligation.			
6c. Provide a measure(s) of the program's impact. The program's impact will be measured by determining loan recipient's geographic location.			
6d. Provide a measure(s) of the program's efficiency. The efficiency of this program will be measured by the number of loan recipients who continue to practice in rural areas.			
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:			
The program will ensure promotion of HPLRP to assist with receiving an adequate number of applicants. The program will require employment verification annually to ensure the geographic location and that the applicant is providing services in the impacted areas.			

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
RURAL HLTH PRIMARY CARE INIT								
HPLRP Program - 1580018								
PROGRAM DISTRIBUTIONS	0	0.00	0	0.00	3,090,000	0.00	0	0.00
TOTAL - PD	0	0.00	0	0.00	3,090,000	0.00	0	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$3,090,000	0.00	\$0	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$3,090,000	0.00		0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00		0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00		0.00

NEW DECISION ITEM

Health and Senior Services					Budget Unit 58052C				
Division of Community and Public Health									
Graduate Medical Education Program Expansion DI# 1580024					HB Section 10.755				
1. AMOUNT OF REQUEST									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	3,502,000	0	0	3,502,000
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	0	0	0	Total	3,502,000	0	0	3,502,000
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				
2. THIS REQUEST CAN BE CATEGORIZED AS:									
New Legislation		New Program		Fund Switch					
Federal Mandate		X Program Expansion		Cost to Continue					
GR Pick-Up		Space Request		Equipment Replacement					
Pay Plan		Other: _____							

NEW DECISION ITEM

Health and Senior Services	Budget Unit <u>58052C</u>
Division of Community and Public Health	
Graduate Medical Education Program Expansion DI# 1580024	HB Section <u>10.755</u>

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

Approximately 600 additional primary care providers are needed in order to eliminate all health professional shortage areas in Missouri. Training and retaining new Missouri physicians will directly address this. This funding request is to assist with the development of new medical residency programs and/or expansion of existing residency programs in rural or underserved communities. Expanding the number of primary care and psychiatry residency positions is an evidence-based strategy to increase health workforce growth and retention, while improving health outcomes for the underserved.

Graduate Medical Education (GME) is the mandatory multi-year residency training after medical school graduation required for full physician licensure. Medical residency is a salaried position with faculty supervision in a training-rich environment. It does not involve or require tuition.

Through expansion of the Missouri GME Grant Program and creation a Missouri GME Technical Assistance Center, the state is positioned to make an incremental increase in the future physician workforce by recruiting, training and retaining new physicians in the state of Missouri.

- Data strongly demonstrates that physicians are most likely to stay and practice in the state in which they trained.
- While the number of medical students training in Missouri has grown over the past decade, an additional 363 residency positions would need to be created to ensure every medical school graduate could stay in state for residency.
- Unfortunately, most of the existing Missouri residency programs are capped in the number of residency slots that are eligible for the standard federal Medicare funding and lack the resources to expand their programs further.

Funding used to promote and establish additional residency programs will allow these programs opportunities to qualify for additional federal funds for sustaining new residency slots. This investment will have long term effects on access to healthcare and Missouri's economy and it will enhance collaboration between Department of Health and Senior Services (DHSS), Department of Social Services (because of substantial potential for innovations in Medicaid GME funding), and Department of Mental Health. Improving the physician workforce while sustaining a positive economic impact will benefit additional healthcare and workforce efforts across multiple departments.

NEW DECISION ITEM

Health and Senior Services	Budget Unit <u>58052C</u>
Division of Community and Public Health	
Graduate Medical Education Program Expansion DI# 1580024	HB Section <u>10.755</u>

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The funding will be used to:

- (1) Start new medical residency programs in facilities taking care of underserved and rural communities.
- (2) Expand current medical residency programs into new facilities taking care of underserved and rural communities.
- (3) Support medical residency training costs, including the standard direct GME costs (to cover resident salaries, faculty and staff salaries, administration costs, fringe benefits, and additional educational expenses) and indirect GME costs (related to the facility expense of running a training program).
- (4) Create a Missouri GME Technical Assistance center to directly support hospitals and community facilities to promote, protect, create, and expand residency programs.

Increasing access to vital healthcare resources by recruiting, training and retaining physicians in the state of Missouri and supporting training programs is a long term investment. DHSS is strategizing GME development in a manner that maximizes attainable federal funding, prioritizing Medicare-funded medical residencies first and then, if needed, leveraging Medicaid GME funding.

Increasing medical residents in the state also has a strong positive economic impact.

- For example, Indiana substantially increased their medical residency infrastructure and physician workforce. Their report, “Economic Impact of Graduate Medical Education Expansion in Indiana,” prepared for their Indiana Graduate Medical Education Board by Tripp Umbach indicated: “The total return on investment (ROI) for every dollar [spent on GME] in 2022 is \$8.46.” This is expected to increase to \$9.89 in 2023, \$10.63 in 2024, \$12.43 in 2025, and \$12.56 by 2026. This ROI is generated largely by physicians educated through the state-funded GME program staying in the state to practice. When physicians practice, they generate healthcare cost savings by improving community health, creating efficiencies in the healthcare delivery system, and producing operational impacts from the business side of being employed or operating a practice.

Many other states have successfully grown GME over decades using this model of combining GME stimulus funding to increase residency training slots with GME technical assistance to navigate the complexities of initiating and maintaining residency programs with sustainable federal funding. For example, Wisconsin:

- Prior to the launch of a Technical Assistance Center, Wisconsin experienced seven rural residency program closures. Since launching their Technical Assistance Center and start-up grant program in 2012, Wisconsin has created 91 new rural residency slots with 65 percent of graduates remaining in rural areas.

Requested amounts are adjusted to account for the Governor Reserve.

NEW DECISION ITEM

Health and Senior Services				Budget Unit 58052C					
Division of Community and Public Health									
Graduate Medical Education Program Expansion DI# 1580024				HB Section 10.755					

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.									
Budget Object Class/Job Class	Dept Req GR DOLLARS	Dept Req GR FTE	Dept Req FED DOLLARS	Dept Req FED FTE	Dept Req OTHER DOLLARS	Dept Req OTHER FTE	Dept Req TOTAL DOLLARS	Dept Req TOTAL FTE	Dept Req One-Time DOLLARS
Professional Services (400)	0		0		0		0		0
Total EE	0		0		0		0		0
Grand Total	0	0.00	0	0.00	0	0.00	0	0.00	0

Budget Object Class/Job Class	Gov Rec GR DOLLARS	Gov Rec GR FTE	Gov Rec FED DOLLARS	Gov Rec FED FTE	Gov Rec OTHER DOLLARS	Gov Rec OTHER FTE	Gov Rec TOTAL DOLLARS	Gov Rec TOTAL FTE	Gov Rec One-Time DOLLARS
Professional Services (400)	3,502,000		0		0		3,502,000		0
Total EE	3,502,000		0		0		3,502,000		0
Grand Total	3,502,000	0.00	0	0.00	0	0.00	3,502,000	0.00	0

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)									
6a. Provide an activity measure(s) for the program. The activity measures for this program are the number of applications received from residency programs, the number of grants awarded to facilities to generate more residency training positions, the amount of technical assistance provided, the number of existing programs who received technical assistance, and the number of facilities without a preexisting residency program who received technical assistance about how to start a new program.									
6b. Provide an measure(s) of the program's quality. The program's quality will be measured by the number of Missouri trained medical residents who practice in Missouri post residency.									
6c. Provide an measure(s) of the program's impact. The program's impact will be measured by the number of new residency slots created.									
6d. Provide an measure(s) of the program's impact. The efficiency of this program will be measured by the number of medical residents who continue to practice in Missouri's rural and underserved areas.									
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:									
DHSS will promote the program and conduct outreach about the availability of technical assistance. DHSS will contract with an organization with GME subject matter expertise to establish and administer the technical assistance center. Conduct an evaluation of the program and track all data and monitor trends; for example, monitor where physicians establish practices in Missouri.									

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
RURAL HLTH PRIMARY CARE INIT								
Graduate Medical Education - 1580024								
PROFESSIONAL SERVICES	0	0.00	0	0.00	0	0.00	3,502,000	0.00
TOTAL - EE	0	0.00	0	0.00	0	0.00	3,502,000	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$3,502,000	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$3,502,000	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

NEW DECISION ITEM

Health and Senior Services					Budget Unit <u>58052C</u>				
Division of Community and Public Health					HB Section <u>10.755</u>				
Behavioral Health GME DI# 1580030									
1. AMOUNT OF REQUEST									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	4,512,500	4,512,500
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	Total	<u>0</u>	<u>0</u>	<u>4,512,500</u>	<u>4,512,500</u>
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	Est. Fringe	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				
Other Fund: Opioid Treatment and Recovery (0705).									
2. THIS REQUEST CAN BE CATEGORIZED AS:									
<input type="checkbox"/> New Legislation					<input type="checkbox"/> New Program				
<input type="checkbox"/> Federal Mandate					<input checked="" type="checkbox"/> Program Expansion				
<input type="checkbox"/> GR Pick-Up					<input type="checkbox"/> Space Request				
<input type="checkbox"/> Pay Plan					Other: <input type="text"/>				
					<input type="checkbox"/> Fund Switch				
					<input type="checkbox"/> Cost to Continue				
					<input type="checkbox"/> Equipment Replacement				

NEW DECISION ITEM

Health and Senior Services	Budget Unit <u>58052C</u>
Division of Community and Public Health	
Behavioral Health GME DI# 1580030	HB Section <u>10.755</u>

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR

The Department requests an additional investment in state Graduate Medical Education (GME) to the fields of psychiatry and internal medicine. This will allow Missouri to train more physicians to treat substance use disorder (SUD), including opioid use disorder (OUD) as both specialties require SUD/OUD training in their residency curriculum for accreditation. Missouri is experiencing a drug overdose crisis. In 2022, the statewide drug overdose rate reached an alarming 35.29 per 100,000 population, resulting in the loss of 2,180 lives. Since 2017, more Missourians have died from overdoses than motor vehicle accidents, and Missouri's rate of potential lives lost due to drug overdose consistently exceeds the national average. The age group most at risk is individuals between 25 to 44 years old.

Missouri has a severe deficiency in residency training positions, which results in over a third of Missouri medical school graduates leaving the state to seek residency positions elsewhere. Data strongly demonstrates that physicians are most likely to stay and practice in the state where they trained. Indiana substantially increased their medical residency infrastructure and physician workforce. Their report, "Economic Impact of Graduate Medical Education Expansion in Indiana, prepared for their Indiana Graduate Medical Education Board by Tripp Umbach indicated: "The total return on investment (ROI) for every dollar [spent on GME] in 2022 is \$8.46." This is expected to increase to \$9.89 in 2023, \$10.63 in 2024, \$12.43 in 2025, and \$12.56 by 2026. This ROI is generated largely by physicians educated through the state-funded GME program staying in the state to practice. When physicians practice, they generate health care cost savings by improving community health, creating efficiencies in the health care delivery system, and producing operational impacts from the business side of being employed or operating a practice. Many other states have successfully grown GME over decades (including Wisconsin, Indiana, North Carolina, and others) using this model of combining GME stimulus funding to increase residency training slots with GME technical assistance to navigate the complexities of initiating and maintaining residency programs with sustainable federal funding, thereby increasing their physician workforce and reducing their total HPSA deficiencies.

NEW DECISION ITEM

Health and Senior Services		Budget Unit <u>58052C</u>
Division of Community and Public Health		
Behavioral Health GME	DI# 1580030	HB Section <u>10.755</u>

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

Requested funds will be used to support and grow GME positions in primary care and psychiatry programs which provide specific training for physicians to prevent, diagnose, and manage SUD/OD. This investment will increase the future physician workforce trained in SUD/OD by optimizing the following approaches according to Missouri's greatest needs:

1. Provide technical assistance to (1) Existing GME facilities to protect and support their current operations and to measure and enhance their current SUD/OD curriculum, (2) Facilities interested in new GME program development or expansion, especially in rural areas needing a growth in workforce equipped to treat SUD/OD.
2. Seed-funding grants to (1) launch brand new GME programs in facilities within areas of Missouri not yet engaged in GME for primary care, psychiatry, and addiction, and/ or (2) foster major expansions of current GME programs to partnering facilities within areas of Missouri not yet engaged in GME.
3. Smaller planning grants to assist health facilities determine if they can indeed apply for the larger seed-funding grants noted above as it requires significant effort, time, and planning to organize and collaborate toward development of new GME.
4. After prioritizing the above per facility availability, any remaining funds may be allocated to expand GME slots in currently existing programs. Directly supporting medical residency training costs would include the standard direct GME costs (to cover resident salaries, faculty and staff salaries, administration costs, fringe benefits, and additional educational expenses) and indirect GME costs (related to the facility expense of running a training program).
5. Supplies, travel, education, and training for DHSS GME staff to support all of the above.

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.

Budget Object Class/Job Class	Dept Req GR DOLLARS	Dept Req GR FTE	Dept Req FED DOLLARS	Dept Req FED FTE	Dept Req OTHER DOLLARS	Dept Req OTHER FTE	Dept Req TOTAL DOLLARS	Dept Req TOTAL FTE	Dept Req One-Time DOLLARS
Travel in State (140)	0		0				0		0
Supplies (190)	0		0				0		0
Professional Services (400)	0		0				0		0
Total EE	<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>		<u>0</u>
Grand Total	<u>0</u>	<u>0.00</u>	<u>0</u>	<u>0.00</u>	<u>0</u>	<u>0.00</u>	<u>0</u>	<u>0.00</u>	<u>0</u>

NEW DECISION ITEM

Health and Senior Services				Budget Unit <u>58052C</u>					
Division of Community and Public Health									
Behavioral Health GME DI# 1580030				HB Section <u>10.755</u>					

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.									
Budget Object Class/Job Class	Gov Rec GR DOLLARS	Gov Rec GR FTE	Gov Rec FED DOLLARS	Gov Rec FED FTE	Gov Rec OTHER DOLLARS	Gov Rec OTHER FTE	Gov Rec TOTAL DOLLARS	Gov Rec TOTAL FTE	Gov Rec One-Time DOLLARS
Travel in State (140)	0		0		10,000		10,000		0
Supplies (190)	0		0		2,500		2,500		0
Professional Services (400)	0		0		4,500,000		4,500,000		0
Total EE	0		0		4,512,500		4,512,500		0
Grand Total	0	0.00	0	0.00	4,512,500	0.00	4,512,500	0.00	0

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)	
6a. Provide an activity measure(s) for the program.	The activity measures for this program are the number of grants awarded to facilities to generate more psychiatry/primary care/addiction GME training positions, the amount of technical assistance provided, the number of existing programs who received technical assistance, and the number of facilities without a preexisting residency program who received technical assistance about how to start a new program.
6b. Provide an measure(s) of the program's quality.	The program's quality will be measured by the volume of training curriculum for OUD/SUD in psychiatry/primary care/addiction GME programs in Missouri.
6c. Provide an measure(s) of the program's impact.	The program's impact will be measured by the number of new GME positions generated.
6d. Provide an measure(s) of the program's efficiency.	The efficiency of this program will be measured by the number of primary care and psychiatry medical residents who continue to practice in Missouri's rural and underserved areas after completing their training.
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:	
DHSS will promote and implement the program, conduct an evaluation, track all data, and monitor trends (e.g., monitor where physicians establish practices in Missouri.)	

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
RURAL HLTH PRIMARY CARE INIT								
Behavioral Health GME - 1580030								
TRAVEL, IN-STATE	0	0.00	0	0.00	0	0.00	10,000	0.00
SUPPLIES	0	0.00	0	0.00	0	0.00	2,500	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	0	0.00	4,500,000	0.00
TOTAL - EE	0	0.00	0	0.00	0	0.00	4,512,500	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$4,512,500	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$4,512,500	0.00

CORE DECISION ITEM

Health and Senior Services					Budget Unit 58053C				
Community and Public Health									
Core - Oral Health Services and Initiatives					HB Section 10.760				
1. CORE FINANCIAL SUMMARY									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	51,615	780,164	3,536	835,315	PS	51,615	780,164	3,536	835,315
EE	0	292,011	56,640	348,651	EE	0	292,011	56,640	348,651
PSD	290,000	1,730,591	598,360	2,618,951	PSD	290,000	1,730,591	598,360	2,618,951
TRF	0	0	0	0	TRF	0	0	0	0
Total	341,615	2,802,766	658,536	3,802,917	Total	341,615	2,802,766	658,536	3,802,917
FTE	0.68	9.23	0.08	9.99	FTE	0.68	9.23	0.08	9.99
Est. Fringe	29,450	429,392	2,519	461,362	Est. Fringe	29,450	429,392	2,519	461,362
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.				
Federal Funds: Department of Health and Senior Services Federal (0143).									
Other Funds: Health Initiatives (0275) and Department of Health and Senior Services - Donated (0658).									

CORE DECISION ITEM

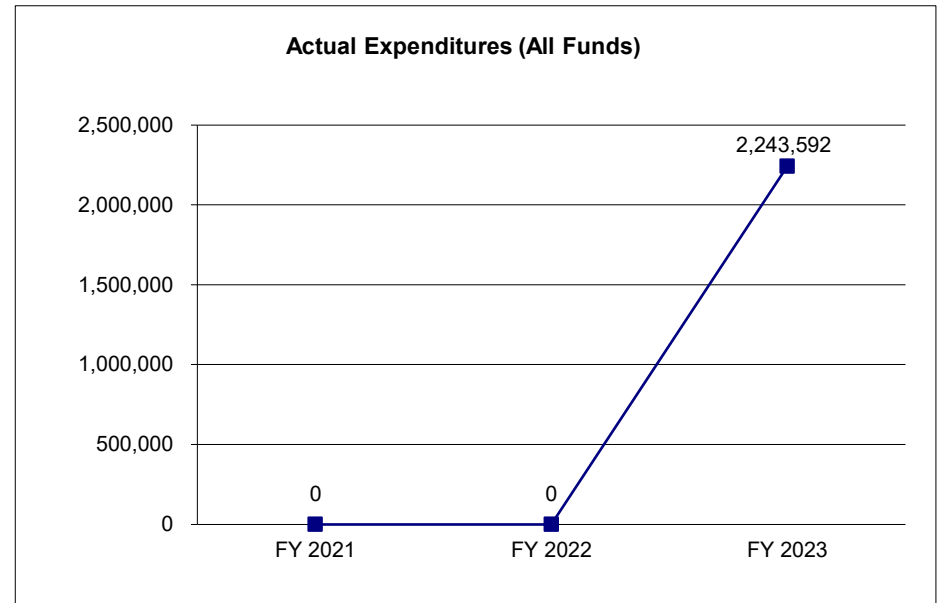
Health and Senior Services	Budget Unit <u>58053C</u>
Community and Public Health	
Core - Oral Health Services and Initiatives	HB Section <u>10.760</u>
2. CORE DESCRIPTION	
<p>Oral health services and initiatives are in place to improve oral health outcomes for Missourians. The Office of Dental Health (ODH) provides education to the general public, dental, and medical providers, public health officials, and decision-makers on a broad range of oral health topics. Topics include strategies to prevent dental problems, the consequences of poor oral health for an individual's overall health, and community water fluoridation. Some of ODH activities include the following:</p> <ul style="list-style-type: none"> • Operating the Preventive Services Program (PSP) and the Dental Sealant Program to deliver education and preventive measures to Missouri children; • Providing training and support for communities which choose to fluoridate their water or start fluoridation in their communities; • Working with partners to advocate for increased access to dental care to prevent costly trips to the hospital and expensive dental restorations; • Coordinating with schools to recruit volunteer dentists, hygienists, and dental students to screen children during the PSP events. Children participating in PSP are screened to assess their dental health to see if treatment is necessary, and to evaluate the dental health of Missouri children. Volunteers apply the fluoride varnish as a part of the PSP event; • Coordinating with Truman Medical Center for the Elks Mobile Dental Program and the Dental Lifeline Network for the Donated Dental Services program. These programs provide dental care to people who may not have access to dental care who include but are not limited to developmentally or intellectually disabled individuals, veterans and those who are medically fragile; • Operating the Improving Oral Health Outcomes, which hopes to increase Missouri's number of children with dental sealants, a known deterrent to dental decay, and to increase the number of people being served by optimally fluoridated community water systems, one of the most cost-effective ways to prevent tooth decay; • Operating the Support Oral Health Workforce Activities, aiming to bring teledentistry services to people with limited access to dental care, and working with the Local Public Health Agencies to provide fluoride varnish to children who may not have access to dental care; • Coordinating efforts to bring the Community Water Fluoridation (CWF) Program to Missouri communities by promoting this evidence based public health measure and coordinating the repair and replacement of CWF equipment; and • Coordinating the school sealant program by working with dental schools and Local Public Health Agencies to go into their local schools and apply dental sealants to the children who do not have dental sealants. 	
3. PROGRAM LISTING (list programs included in this core funding)	
Dental Health Education Dental Health Workforce Issues Education, Training & Support for Community Water Fluoridation Elks Mobile Dental and Donated Dental Program Improving Oral Health Outcomes Schools Preventive Services Program and Dental Sealant Program for MO Children Teledentistry	

CORE DECISION ITEM

Health and Senior Services	Budget Unit <u>58053C</u>
Community and Public Health	
Core - Oral Health Services and Initiatives	HB Section <u>10.760</u>

4. FINANCIAL HISTORY

	FY 2021 Actual	FY 2022 Actual	FY 2023 Actual	FY 2024 Current Yr.
Appropriation (All Funds)	0	0	4,193,456	3,802,917
Less Reverted (All Funds)	0	0	(8,896)	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	0	0	4,184,560	3,802,917
Actual Expenditures (All Funds)	0	0	2,243,592	N/A
Unexpended (All Funds)	0	0	1,940,968	N/A
Unexpended, by Fund:				
General Revenue	0	0	288	N/A
Federal	0	0	1,446,253	N/A
Other	0	0	494,427	N/A



Reverted includes the statutory three percent reserve amount (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES ORAL HEALTH SERVICES AND INITIATIVES

5. CORE RECONCILIATION DETAIL

			Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS									
Core Reallocation	846	5208	PS	0.56	0	32,051	0	32,051	CORE reallocations for programmatic alignment.
Core Reallocation	846	5094	PS	0.68	51,615	0	0	51,615	CORE reallocations for programmatic alignment.
Core Reallocation	846	5762	PS	8.67	0	748,113	0	748,113	CORE reallocations for programmatic alignment.
Core Reallocation	846	5765	PS	0.08	0	0	3,536	3,536	CORE reallocations for programmatic alignment.
Core Reallocation	846	5766	EE	0.00	0	0	56,640	56,640	CORE reallocations for programmatic alignment.
Core Reallocation	846	5764	EE	0.00	0	23,810	0	23,810	CORE reallocations for programmatic alignment.
Core Reallocation	846	5763	EE	0.00	0	268,201	0	268,201	CORE reallocations for programmatic alignment.
Core Reallocation	846	5764	PD	0.00	0	545,729	0	545,729	CORE reallocations for programmatic alignment.
Core Reallocation	846	5761	PD	0.00	200,000	0	0	200,000	CORE reallocations for programmatic alignment.
Core Reallocation	846	5760	PD	0.00	90,000	0	0	90,000	CORE reallocations for programmatic alignment.
Core Reallocation	846	5766	PD	0.00	0	0	598,360	598,360	CORE reallocations for programmatic alignment.
Core Reallocation	846	5213	PD	0.00	0	1,184,862	0	1,184,862	CORE reallocations for programmatic alignment.
NET DEPARTMENT CHANGES				9.99	341,615	2,802,766	658,536	3,802,917	

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES ORAL HEALTH SERVICES AND INITIATIVES

5. CORE RECONCILIATION DETAIL

	Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE REQUEST							
	PS	9.99	51,615	780,164	3,536	835,315	
	EE	0.00	0	292,011	56,640	348,651	
	PD	0.00	290,000	1,730,591	598,360	2,618,951	
	Total	9.99	341,615	2,802,766	658,536	3,802,917	
GOVERNOR'S RECOMMENDED CORE							
	PS	9.99	51,615	780,164	3,536	835,315	
	EE	0.00	0	292,011	56,640	348,651	
	PD	0.00	290,000	1,730,591	598,360	2,618,951	
	Total	9.99	341,615	2,802,766	658,536	3,802,917	

DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
ORAL HEALTH SERVICES AND INITIATIVES									
CORE									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	51,615	0.68	51,615	0.68	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	780,164	9.23	780,164	9.23	
HEALTH INITIATIVES	0	0.00	0	0.00	3,536	0.08	3,536	0.08	
TOTAL - PS	0	0.00	0	0.00	835,315	9.99	835,315	9.99	
EXPENSE & EQUIPMENT									
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	292,011	0.00	292,011	0.00	
DEPT OF HEALTH-DONATED	0	0.00	0	0.00	56,640	0.00	56,640	0.00	
TOTAL - EE	0	0.00	0	0.00	348,651	0.00	348,651	0.00	
PROGRAM-SPECIFIC									
GENERAL REVENUE	0	0.00	0	0.00	290,000	0.00	290,000	0.00	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	1,730,591	0.00	1,730,591	0.00	
DEPT OF HEALTH-DONATED	0	0.00	0	0.00	598,360	0.00	598,360	0.00	
TOTAL - PD	0	0.00	0	0.00	2,618,951	0.00	2,618,951	0.00	
TOTAL	0	0.00	0	0.00	3,802,917	9.99	3,802,917	9.99	
Pay Plan - 0000012									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	26,616	0.00	
HEALTH INITIATIVES	0	0.00	0	0.00	0	0.00	114	0.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	26,730	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	26,730	0.00	
GRAND TOTAL	\$0	0.00	\$0	0.00	\$3,802,917	9.99	\$3,829,647	9.99	

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58053C BUDGET UNIT NAME: Oral Health Services and Initiatives HOUSE BILL SECTION: 10.760	DEPARTMENT: Department of Health and Senior Services (DHSS) DIVISION: Division of Community and Public Health (DCPH)
1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.	
DEPARTMENT REQUEST	
DHSS has worked to create and breakdown CORES within DCPH in order to align the budget structure with the division's operations. The Department requests fifty percent (50%) flexibility between House Bills 10.700, 10.705, 10.710, 10.715, 10.720, 10.725, 10.730, 10.735, 10.740, 10.745, 10.750, 10.755, 10.760, 10.765, 10.770, and 10.775 in order to ensure continuity of operations during the transition.	
2. Estimate how much flexibility will be used for the budget year. How much flexibility was used in the Prior Year Budget and the Current Year Budget? Please specify the amount.	
PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT YEAR ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
Not applicable.	Not applicable.
BUDGET REQUEST ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED	
Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of Governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The Department's requested flex will allow the Department to utilize available resources in the most effective manner as the need arises. Flexibility (50%) between House bill sections will allow for continuity of operations as DCPH continues to align budget structure with its operating structure. The Department cannot predict how much flexibility will be utilized.	
3. Please explain how flexibility was used in the prior and/or current years.	
PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
Not applicable.	Not applicable.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
ORAL HEALTH SERVICES AND INITIATIVES								
CORE								
PROJECT SPECIALIST	0	0.00	0	0.00	327,196	3.51	327,196	3.51
SPECIAL ASST PROFESSIONAL	0	0.00	0	0.00	94,613	0.47	94,613	0.47
HEALTH PROGRAM AIDE	0	0.00	0	0.00	52,383	0.58	52,383	0.58
LEAD ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	31,840	0.73	31,840	0.73
SENIOR PROGRAM SPECIALIST	0	0.00	0	0.00	37,886	0.50	37,886	0.50
ASSOC RESEARCH/DATA ANALYST	0	0.00	0	0.00	34,778	0.62	34,778	0.62
ASSOCIATE EPIDEMIOLOGIST	0	0.00	0	0.00	121	0.00	121	0.00
PUBLIC HEALTH PROGRAM ASSOC	0	0.00	0	0.00	13,938	0.22	13,938	0.22
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	151,816	2.30	151,816	2.30
SR PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	35,161	0.40	35,161	0.40
PUBLIC HEALTH PROGRAM MANAGER	0	0.00	0	0.00	55,583	0.66	55,583	0.66
TOTAL - PS	0	0.00	0	0.00	835,315	9.99	835,315	9.99
TRAVEL, IN-STATE	0	0.00	0	0.00	14,139	0.00	14,139	0.00
TRAVEL, OUT-OF-STATE	0	0.00	0	0.00	10,978	0.00	10,978	0.00
FUEL & UTILITIES	0	0.00	0	0.00	522	0.00	522	0.00
SUPPLIES	0	0.00	0	0.00	190,396	0.00	190,396	0.00
PROFESSIONAL DEVELOPMENT	0	0.00	0	0.00	28,030	0.00	28,030	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	1,890	0.00	1,890	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	84,358	0.00	84,358	0.00
HOUSEKEEPING & JANITORIAL SERV	0	0.00	0	0.00	1,485	0.00	1,485	0.00
M&R SERVICES	0	0.00	0	0.00	12,644	0.00	12,644	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	4	0.00	4	0.00
OTHER EQUIPMENT	0	0.00	0	0.00	463	0.00	463	0.00
BUILDING LEASE PAYMENTS	0	0.00	0	0.00	3,094	0.00	3,094	0.00
EQUIPMENT RENTALS & LEASES	0	0.00	0	0.00	389	0.00	389	0.00
MISCELLANEOUS EXPENSES	0	0.00	0	0.00	259	0.00	259	0.00
TOTAL - EE	0	0.00	0	0.00	348,651	0.00	348,651	0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
ORAL HEALTH SERVICES AND INITIATIVES								
CORE								
PROGRAM DISTRIBUTIONS	0	0.00	0	0.00	2,618,951	0.00	2,618,951	0.00
TOTAL - PD	0	0.00	0	0.00	2,618,951	0.00	2,618,951	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$3,802,917	9.99	\$3,802,917	9.99
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$341,615	0.68	\$341,615	0.68
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$2,802,766	9.23	\$2,802,766	9.23
OTHER FUNDS	\$0	0.00	\$0	0.00	\$658,536	0.08	\$658,536	0.08

PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.760</u>
Oral Health Services and Initiatives	
Program is found in the following core budget(s): Oral Health Services and Initiatives	
<p>1a. What strategic priority does this program address? Public Health System Building; Social Determinants of Health; and Whole Person Health Access.</p> <p>1b. What does this program do? The Office of Dental Health (ODH) provides education to the general public, dental, and medical providers, public health officials, and decision-makers on a broad range of oral health topics. Topics include strategies to prevent dental problems, the consequences of poor oral health for an individual's overall health, and community water fluoridation. ODH activities include the following:</p> <ul style="list-style-type: none"> • Operating the Preventive Services Program (PSP) and the Dental Sealant Program to deliver education and preventive measures to Missouri children; • Providing training and support for communities which choose to fluoridate their water or start fluoridation in their communities; • Working with partners to advocate for increased access to dental care to prevent costly trips to the hospital and expensive dental restorations; • Coordinating with schools to recruit volunteer dentists, hygienists, and dental students to screen children during the PSP events. Children participating in PSP are screened to assess their dental health to see if treatment is necessary, and to evaluate the dental health of Missouri children. Volunteers apply the fluoride varnish as a part of the PSP event; • Coordinating with the Truman Medical Center for the Elks Mobile Dental Program and the Dental Lifeline Network for the Donated Dental Services program. These programs provide dental care to people who may not have access to dental care who include but are not limited to developmentally or intellectually disabled individuals, veterans and those who are medically fragile; • Operating the Improving Oral Health Outcomes, which hopes to increase Missouri's number of children with dental sealants, a known deterrent to dental decay, and to increase the number of people being served by optimally fluoridated community water systems, one of the most cost-effective ways to prevent tooth decay; • Operating the Support Oral Health Workforce Activities, aiming to bring teledentistry services to people with limited access to dental care, and working with the Local Public Health Agencies to provide fluoride varnish to children who may not have access to dental care; • Coordinating efforts to bring the Community Water Fluoridation (CWF) Program to Missouri communities by promoting this evidence based public health measure and coordinating the repair and replacement of CWF equipment. • Coordinating the school sealant program by working with dental schools and Local Public Health Agencies to go into their local schools and apply dental sealants to the children who do not have dental sealants. 	

PROGRAM DESCRIPTION

Health and Senior Services

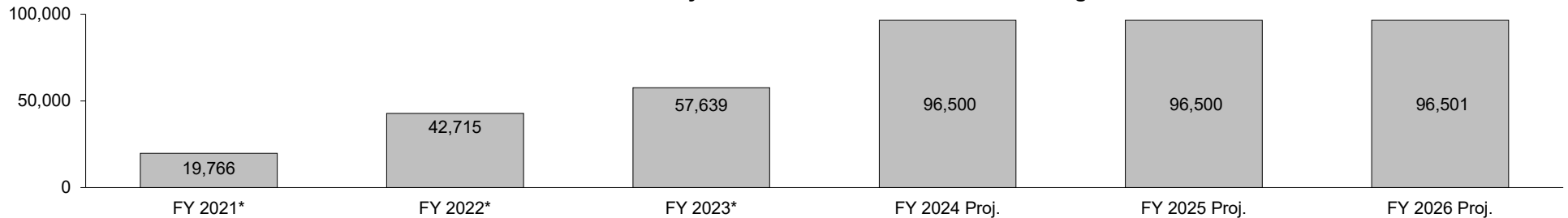
HB Section(s): 10.760

Oral Health Services and Initiatives

Program is found in the following core budget(s): Oral Health Services and Initiatives

2a. Provide an activity measure(s) for the program.

Children Served by Oral Health Preventive Services Program



*Schools were closed in March 2020 due to the COVID-19 pandemic and many schools continued to be closed to visitors or were online through the 2021 to 2022 school year. Since access to schools under COVID-19 restrictions was severely limited, the program's education, screening, and varnish application was interrupted.

2b. Provide a measure(s) of the program's quality.

Preventive Services Program (PSP) Events Survey of PSP Coordinators (FY 2023)

How satisfied are you with PSP?

Satisfied

98.83%

Neutral

1.17%

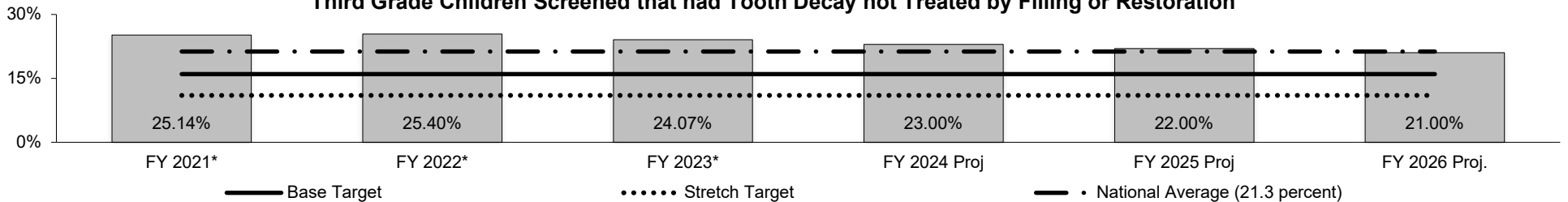
Dissatisfied

0.00%

Customer satisfaction survey questions were changed for FY 2022 compared to previous years.

2c. Provide a measure(s) of the program's impact.

Third Grade Children Screened that had Tooth Decay not Treated by Filling or Restoration



*Dependent on access to schools under COVID-19 restrictions, the program's education, screening, and varnish application may be interrupted. Dental offices were closed for several months of 2020 so people who did have access to dental care could not be seen and when dental offices opened up, it was hard to get in for an appointment, and so more decay has been left untreated.

Base Target - to reduce to 16 percent by FY 2023.

Stretch Target - to reduce to 11 percent by FY 2023. Since FY 2014, the Office of Dental Health has noticed an almost four percent drop in the instances of untreated tooth decay in the third grade children who are screened and that number continues to decline. Based on the average cost of restorations, this would represent a cost savings of over \$2 million to the Missouri Medicaid Program.

PROGRAM DESCRIPTION

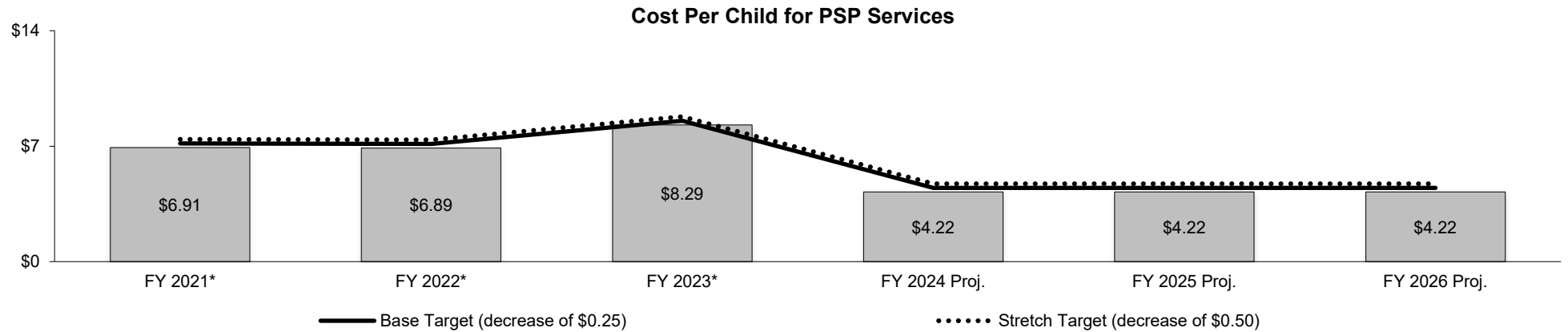
Health and Senior Services

HB Section(s): 10.760

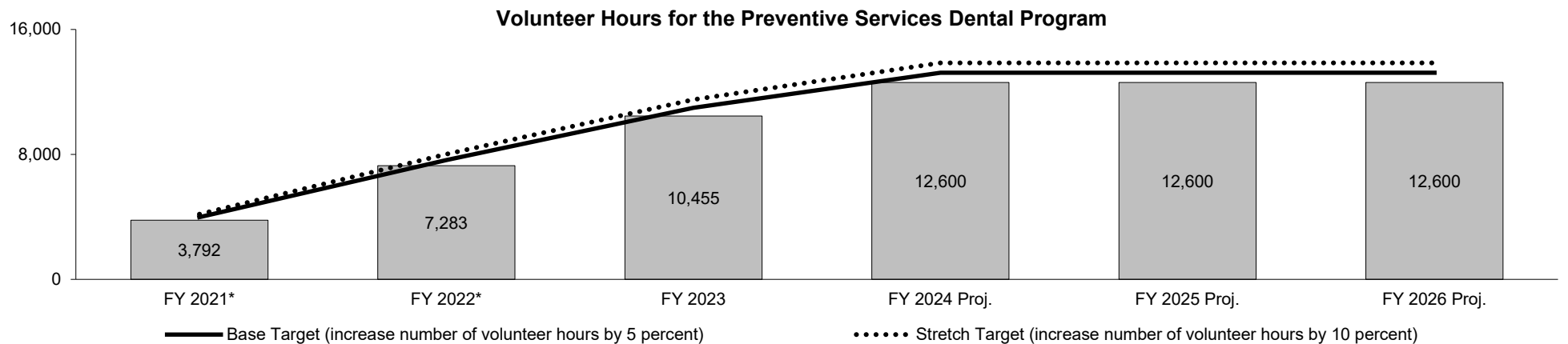
Oral Health Services and Initiatives

Program is found in the following core budget(s): Oral Health Services and Initiatives

2d. Provide a measure(s) of the program's efficiency.



*Due to COVID-19 restrictions and PPE expenses, cost per child is expected to increase. For the 2021 to 2022 school years, even though most schools could not participate in the usual full PSP event, the program still provided fluoride varnish and oral care supplies and education to children who could not have a screening, deemed "Plan B." Market Value Cost of what parent would pay per child is \$183, which includes fluoride varnish application twice a year, screening, toothbrush, toothpaste, floss, bookmark and mirror cling once a year. PSP Services include dental screening and fluoride treatment by a dental professional and oral care supplies and literature.



*In 2021 and 2022 many schools were only on-line or did not allow visitors which severely diminished the number of schools participating in PSP and the need for volunteers.

PROGRAM DESCRIPTION

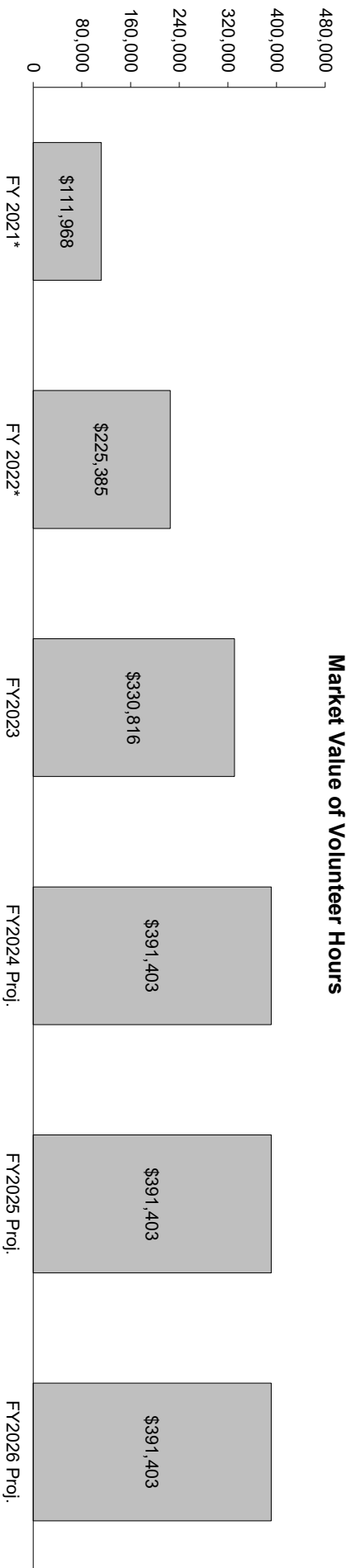
Health and Senior Services

Oral Health Services and Initiatives

HB Section(s): 10.760

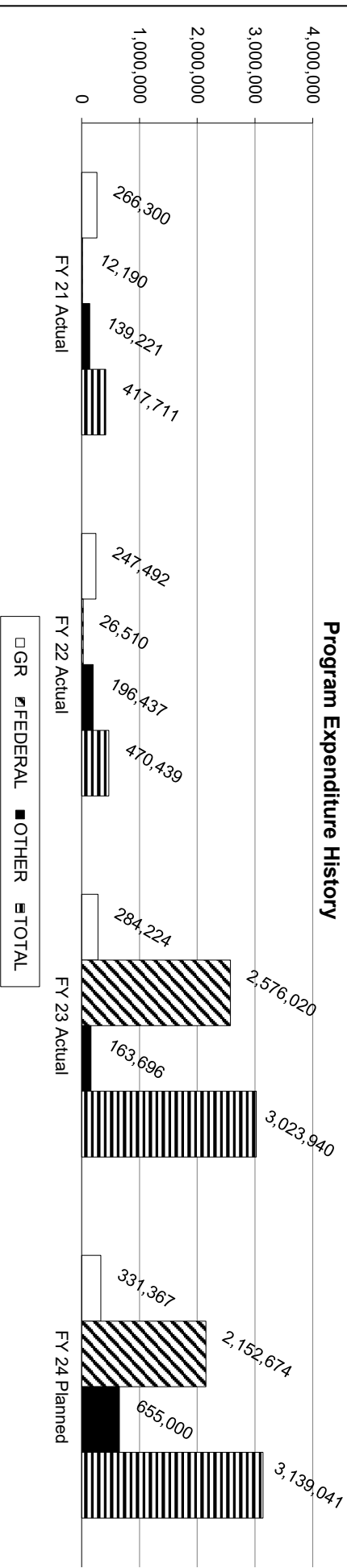
Program is found in the following core budget(s): Oral Health Services and Initiatives

2d. Provide a measure(s) of the program's efficiency. (continued)



*In 2021 and 2022, many schools were only on-line or did not allow visitors which severely diminished the number of schools participating in PSP and the need for volunteers. 2021 Market value is calculated based on Missouri median hourly wages obtained from U.S. Bureau of Labor Statistics. (Dentist - \$75.32; Dental Hygienist - \$33.80; Lay Volunteer - \$18.70.) https://www.bls.gov/oes/current/oes_mo.htm#00-0000

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.760</u>
Oral Health Services and Initiatives	
Program is found in the following core budget(s): Oral Health Services and Initiatives	
4. What are the sources of the "Other " funds? Department of Health and Senior Services - Donated (0658), Health Initiatives (0275).	
5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.) Section 192.050, RSMo.	
6. Are there federal matching requirements? If yes, please explain. Yes, the Title V Maternal and Child Health Services Block grant requires three dollars of state funds for every four dollars of federal funds and the HRSA grant requires a 40 percent match from a non-federal source.	
7. Is this a federally mandated program? If yes, please explain. No.	

CORE DECISION ITEM

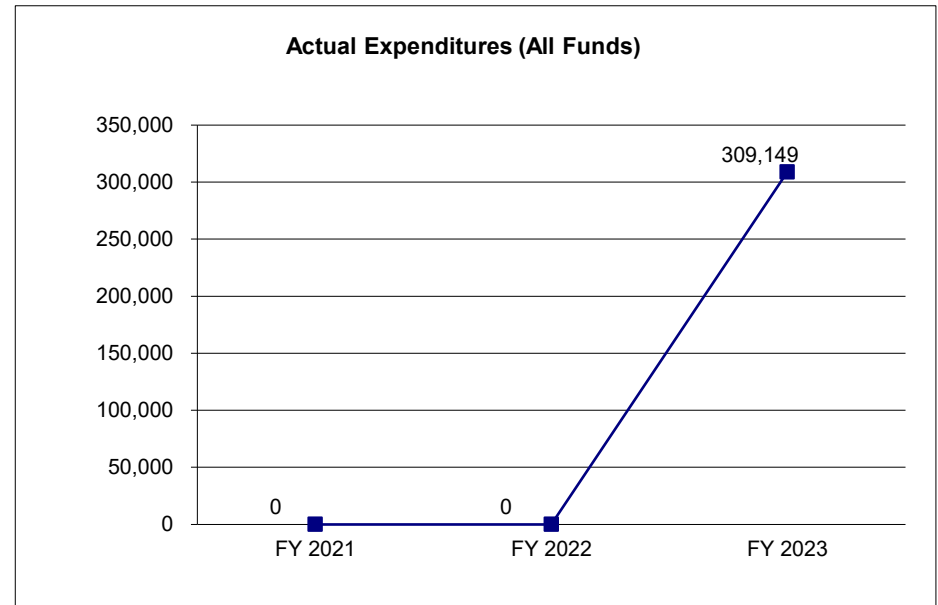
Health and Senior Services Community and Public Health Core - Minority Health Initiatives	Budget Unit 58240C HB Section 10.765																																																																																
1. CORE FINANCIAL SUMMARY																																																																																	
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th colspan="4" style="text-align: center;">FY 2025 Budget Request</th> <th></th> <th colspan="4" style="text-align: center;">FY 2025 Governor's Recommendation</th> </tr> <tr> <th></th> <th style="text-align: center;">GR</th> <th style="text-align: center;">Federal</th> <th style="text-align: center;">Other</th> <th style="text-align: center;">Total</th> <th></th> <th style="text-align: center;">GR</th> <th style="text-align: center;">Federal</th> <th style="text-align: center;">Other</th> <th style="text-align: center;">Total</th> </tr> </thead> <tbody> <tr> <td>PS</td> <td style="text-align: right;">257,913</td> <td style="text-align: right;">39,128</td> <td style="text-align: right;">0</td> <td style="text-align: right;">297,041</td> <td>PS</td> <td style="text-align: right;">257,913</td> <td style="text-align: right;">39,128</td> <td style="text-align: right;">0</td> <td style="text-align: right;">297,041</td> </tr> <tr> <td>EE</td> <td style="text-align: right;">105,330</td> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> <td style="text-align: right;">105,330</td> <td>EE</td> <td style="text-align: right;">105,330</td> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> <td style="text-align: right;">105,330</td> </tr> <tr> <td>PSD</td> <td style="text-align: right;">89,332</td> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> <td style="text-align: right;">89,332</td> <td>PSD</td> <td style="text-align: right;">89,332</td> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> <td style="text-align: right;">89,332</td> </tr> <tr> <td>TRF</td> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> <td>TRF</td> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> </tr> <tr> <td>Total</td> <td style="text-align: right;">452,575</td> <td style="text-align: right;">39,128</td> <td style="text-align: right;">0</td> <td style="text-align: right;">491,703</td> <td>Total</td> <td style="text-align: right;">452,575</td> <td style="text-align: right;">39,128</td> <td style="text-align: right;">0</td> <td style="text-align: right;">491,703</td> </tr> <tr> <td>FTE</td> <td style="text-align: right;">4.24</td> <td style="text-align: right;">0.49</td> <td style="text-align: right;">0.00</td> <td style="text-align: right;">4.73</td> <td>FTE</td> <td style="text-align: right;">4.24</td> <td style="text-align: right;">0.49</td> <td style="text-align: right;">0.00</td> <td style="text-align: right;">4.73</td> </tr> </tbody> </table>			FY 2025 Budget Request					FY 2025 Governor's Recommendation					GR	Federal	Other	Total		GR	Federal	Other	Total	PS	257,913	39,128	0	297,041	PS	257,913	39,128	0	297,041	EE	105,330	0	0	105,330	EE	105,330	0	0	105,330	PSD	89,332	0	0	89,332	PSD	89,332	0	0	89,332	TRF	0	0	0	0	TRF	0	0	0	0	Total	452,575	39,128	0	491,703	Total	452,575	39,128	0	491,703	FTE	4.24	0.49	0.00	4.73	FTE	4.24	0.49	0.00	4.73
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<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>																																																																																	
Federal Funds: Department of Health and Senior Services Federal (0143).																																																																																	
2. CORE DESCRIPTION																																																																																	
<p>Minority Health Initiatives (MHI) work to develop public health interventions and strategies to decrease the rate of health disparities in underserved/vulnerable populations that are geographically, culturally, and economically isolated. This is accomplished through providing technical support for the design of culturally appropriate health messages and educational outreach; convening minority-specific community engagement opportunities, and assisting state and local partners with program implementation of activities for “hard-to-reach” minority and underserved populations.</p> <p>The MHI assists community minority health organizations throughout Missouri by identifying available funding for health programs through public and private grants and promoting coalition and community development resources. MHI also advises the Missouri Department of Health and Senior Services (DHSS) director on topics related to promoting health equity and addressing health disparities impacting all Missourians with an emphasis on minority and underserved geographic areas; provides support to the Health Equity Stakeholder Committee; support for the statewide health assessment and statewide health improvement plan addressing social determinates of health, promotes the development of community coalitions and resources across Missouri; provides technical assistance related to health equity, health literacy, and social determinates of health; coordinates with internal and external partners on strategies to promote health equity and reduce health disparities impacting Missourians, coordinates the development of culturally sensitive health educational programs designed to promote health literacy and reduce the incidence of disease among minority populations across Missouri; and addresses new issues impacting the health of minorities and underserved areas of Missouri.</p>																																																																																	
3. PROGRAM LISTING (list programs included in this core funding)																																																																																	
Minority Health Initiatives																																																																																	

CORE DECISION ITEM

Health and Senior Services	Budget Unit 58240C
Community and Public Health	
Core - Minority Health Initiatives	HB Section 10.765

4. FINANCIAL HISTORY

	FY 2021 Actual	FY 2022 Actual	FY 2023 Actual	FY 2024 Current Yr.
Appropriation (All Funds)	0	0	450,192	491,703
Less Reverted (All Funds)	0	0	(12,426)	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	0	0	437,766	491,703
Actual Expenditures (All Funds)	0	0	309,149	N/A
Unexpended (All Funds)	0	0	128,617	N/A
Unexpended, by Fund:				
General Revenue	0	0	121,685	N/A
Federal	0	0	6,932	N/A
Other	0	0	0	N/A



Reverted includes the statutory three percent reserve amount (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.

CORE RECONCILIATION DETAIL

**DEPARTMENT OF HEALTH & SENIOR SERVICES
MINORITY HEALTH INITIATIVES**

5. CORE RECONCILIATION DETAIL

			Budget Class	FTE	GR	Federal	Other	Total	Explanation
TAFP AFTER VETOES									
			PS	4.48	238,765	39,128	0	277,893	
			EE	0.00	105,552	0	0	105,552	
			PD	0.00	89,110	0	0	89,110	
			Total	4.48	433,427	39,128	0	472,555	
DEPARTMENT CORE ADJUSTMENTS									
Core Reallocation	1193 7146		PS	0.00	0	0	0	0	CORE reallocations for programmatic alignment.
Core Reallocation	1193 5100		PS	0.25	19,148	0	0	19,148	CORE reallocations for programmatic alignment.
Core Reallocation	1193 7144		PS	0.00	0	0	0	0	CORE reallocations for programmatic alignment.
Core Reallocation	1193 7145		EE	0.00	(222)	0	0	(222)	CORE reallocations for programmatic alignment.
Core Reallocation	1193 7145		PD	0.00	222	0	0	222	CORE reallocations for programmatic alignment.
NET DEPARTMENT CHANGES				0.25	19,148	0	0	19,148	
DEPARTMENT CORE REQUEST									
			PS	4.73	257,913	39,128	0	297,041	
			EE	0.00	105,330	0	0	105,330	
			PD	0.00	89,332	0	0	89,332	
			Total	4.73	452,575	39,128	0	491,703	
GOVERNOR'S RECOMMENDED CORE									
			PS	4.73	257,913	39,128	0	297,041	
			EE	0.00	105,330	0	0	105,330	

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES
MINORITY HEALTH INITIATIVES

5. CORE RECONCILIATION DETAIL

	Budget Class	FTE	GR	Federal	Other	Total	Explanation
GOVERNOR'S RECOMMENDED CORE							
	PD	0.00	89,332	0	0	89,332	
	Total	4.73	452,575	39,128	0	491,703	

DECISION ITEM SUMMARY

Budget Unit								
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
MINORITY HEALTH INITIATIVES								
CORE								
PERSONAL SERVICES								
GENERAL REVENUE	126,360	2.23	238,765	3.99	257,913	4.24	257,913	4.24
DHSS-FEDERAL AND OTHER FUNDS	27,038	0.43	39,128	0.49	39,128	0.49	39,128	0.49
TOTAL - PS	153,398	2.66	277,893	4.48	297,041	4.73	297,041	4.73
EXPENSE & EQUIPMENT								
GENERAL REVENUE	94,659	0.00	105,552	0.00	105,330	0.00	105,330	0.00
TOTAL - EE	94,659	0.00	105,552	0.00	105,330	0.00	105,330	0.00
PROGRAM-SPECIFIC								
GENERAL REVENUE	59,066	0.00	89,110	0.00	89,332	0.00	89,332	0.00
TOTAL - PD	59,066	0.00	89,110	0.00	89,332	0.00	89,332	0.00
TOTAL	307,123	2.66	472,555	4.48	491,703	4.73	491,703	4.73
Pay Plan - 0000012								
PERSONAL SERVICES								
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	9,505	0.00
TOTAL - PS	0	0.00	0	0.00	0	0.00	9,505	0.00
TOTAL	0	0.00	0	0.00	0	0.00	9,505	0.00
GRAND TOTAL	\$307,123	2.66	\$472,555	4.48	\$491,703	4.73	\$501,208	4.73

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im_disummary

FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58240C BUDGET UNIT NAME: Minority Health Initiatives HOUSE BILL SECTION: 10.765	DEPARTMENT: Department of Health and Senior Services (DHSS) DIVISION: Division of Community and Public Health (DCPH)
1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.	
DEPARTMENT REQUEST	
DHSS has worked to create and breakdown CORES within DCPH in order to align the budget structure with the division's operations. The Department requests fifty percent (50%) flexibility between House Bills 10.700, 10.705, 10.710, 10.715, 10.720, 10.725, 10.730, 10.735, 10.740, 10.745, 10.750, 10.755, 10.760, 10.765, 10.770, and 10.775 in order to ensure continuity of operations during the transition.	
2. Estimate how much flexibility will be used for the budget year. How much flexibility was used in the Prior Year Budget and the Current Year Budget? Please specify the amount.	
PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT YEAR ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
Not applicable.	Not applicable.
BUDGET REQUEST ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED	
Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of Governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The Department's requested flex will allow the Department to utilize available resources in the most effective manner as the need arises. Flexibility (50%) between House bill sections will allow for continuity of operations as DCPH continues to align budget structure with its operating structure. The Department cannot predict how much flexibility will be utilized.	
3. Please explain how flexibility was used in the prior and/or current years.	
PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
Not applicable.	Not applicable.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
MINORITY HEALTH INITIATIVES								
CORE								
PROJECT SPECIALIST	0	0.00	18,640	0.49	0	0.00	0	0.00
LEGAL COUNSEL	0	0.00	4,843	0.06	0	(0.00)	0	(0.00)
SPECIAL ASST PROFESSIONAL	77,573	1.15	198,989	2.69	118,110	1.55	118,110	1.55
LEAD ADMIN SUPPORT ASSISTANT	36,111	0.98	42,015	1.00	47,584	1.30	47,584	1.30
ADMIN SUPPORT PROFESSIONAL	0	0.00	216	0.00	0	0.00	0	0.00
PUBLIC HEALTH PROGRAM ASSOC	0	0.00	1,942	0.04	0	0.00	0	0.00
PUBLIC HEALTH PROGRAM SPEC	0	0.00	10	0.00	0	0.00	0	0.00
SR PUBLIC HEALTH PROGRAM SPEC	561	0.01	0	0.00	19,873	0.33	19,873	0.33
PUBLIC HEALTH PROGRAM MANAGER	39,153	0.52	11,238	0.20	111,474	1.55	111,474	1.55
TOTAL - PS	153,398	2.66	277,893	4.48	297,041	4.73	297,041	4.73
TRAVEL, IN-STATE	2,752	0.00	29,306	0.00	29,084	0.00	29,084	0.00
TRAVEL, OUT-OF-STATE	2,415	0.00	231	0.00	231	0.00	231	0.00
SUPPLIES	1,944	0.00	27,440	0.00	27,440	0.00	27,440	0.00
PROFESSIONAL DEVELOPMENT	59,513	0.00	28,077	0.00	28,077	0.00	28,077	0.00
COMMUNICATION SERV & SUPP	1,243	0.00	3,250	0.00	3,250	0.00	3,250	0.00
PROFESSIONAL SERVICES	22,568	0.00	9,553	0.00	9,553	0.00	9,553	0.00
M&R SERVICES	0	0.00	475	0.00	475	0.00	475	0.00
COMPUTER EQUIPMENT	0	0.00	301	0.00	301	0.00	301	0.00
OFFICE EQUIPMENT	0	0.00	10	0.00	10	0.00	10	0.00
OTHER EQUIPMENT	0	0.00	1,394	0.00	1,394	0.00	1,394	0.00
BUILDING LEASE PAYMENTS	0	0.00	3,870	0.00	3,870	0.00	3,870	0.00
EQUIPMENT RENTALS & LEASES	0	0.00	1,575	0.00	1,575	0.00	1,575	0.00
MISCELLANEOUS EXPENSES	4,224	0.00	70	0.00	70	0.00	70	0.00
TOTAL - EE	94,659	0.00	105,552	0.00	105,330	0.00	105,330	0.00
PROGRAM DISTRIBUTIONS	59,066	0.00	89,110	0.00	89,332	0.00	89,332	0.00
TOTAL - PD	59,066	0.00	89,110	0.00	89,332	0.00	89,332	0.00
GRAND TOTAL	\$307,123	2.66	\$472,555	4.48	\$491,703	4.73	\$491,703	4.73
GENERAL REVENUE	\$280,085	2.23	\$433,427	3.99	\$452,575	4.24	\$452,575	4.24
FEDERAL FUNDS	\$27,038	0.43	\$39,128	0.49	\$39,128	0.49	\$39,128	0.49
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

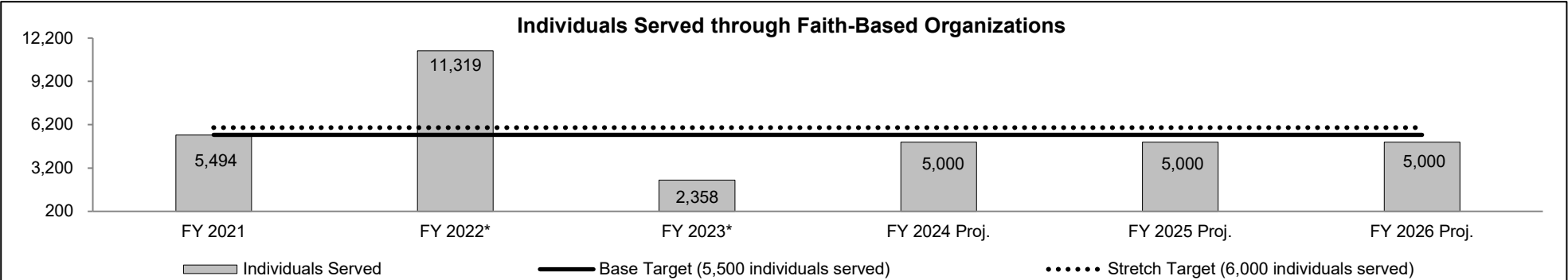
PROGRAM DESCRIPTION

Department of Health and Senior Services	HB Section(s): <u>10.765</u>																																																
Minority Health Initiatives																																																	
Program is found in the following core budget(s): <u>Minority Health Initiatives</u>																																																	
<p>1a. What strategic priority does this program address? Build and Strengthen Partnerships, Expand Access to Services, Use Clear and Consistent Communication to Build Trust.</p> <p>1b. What does this program do? The Minority Health Initiatives (MHI) exists to decrease health disparities in minority and "hard to reach" (underserved/vulnerable) communities. Some of the Office activities include the following:</p> <ul style="list-style-type: none"> • Conducting public health interventions, providing technical support, and designing culturally appropriate health messages; • Providing educational outreach to faith-based organizations, geographically, culturally, and economically isolated minority populations; • Focusing on drug addiction prevention, violence prevention, infant mortality, viral disease reduction (HIV/AIDS), obesity, diabetes, chronic diseases; • Providing education to and Lunch and Learns with Missouri senior citizens across the State of Missouri; • Working and collaborating with Lincoln University to create agricultural businesses, and educational opportunities for youth, adults, and senior citizens; and • Advising, supporting, and providing resources to the Missouri Legislative Black Caucus, Local and Statewide Ecumenical Clergy, Church of God In Christ (COGIC), Metropolitan Clergy Coalition, and Hispanic Leaders Group. 																																																	
<p>2a. Provide an activity measure(s) for the program.</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <th colspan="6">Health Screenings Conducted by Agencies at Events Co-Sponsored by the DHSS Minority Health Initiatives in FY 2023</th> </tr> <tr> <td>Blood Pressure Checks</td> <td>390</td> <td>Asthma</td> <td>61</td> <td>HIV/STD</td> <td>20</td> </tr> <tr> <td>BMI Evaluations</td> <td>28</td> <td>Colon Cancer</td> <td>23</td> <td>Mental Health</td> <td>5</td> </tr> <tr> <td>Cholesterol</td> <td>48</td> <td>Dental Hygiene</td> <td>15</td> <td>Hepatitis C</td> <td>0</td> </tr> <tr> <td>Diabetes</td> <td>96</td> <td>Mammogram</td> <td>18</td> <td>Lead</td> <td>4</td> </tr> <tr> <td>Eye Exam</td> <td>8</td> <td>Flu Shots</td> <td>37</td> <td>COVID-19</td> <td>81</td> </tr> <tr> <td>Glaucoma</td> <td>0</td> <td>Prostate</td> <td>7</td> <td></td> <td></td> </tr> <tr> <td colspan="4"></td> <td>GRAND TOTAL</td> <td>841</td> </tr> </table> <p>Number of screenings conducted are based on community requests.</p>		Health Screenings Conducted by Agencies at Events Co-Sponsored by the DHSS Minority Health Initiatives in FY 2023						Blood Pressure Checks	390	Asthma	61	HIV/STD	20	BMI Evaluations	28	Colon Cancer	23	Mental Health	5	Cholesterol	48	Dental Hygiene	15	Hepatitis C	0	Diabetes	96	Mammogram	18	Lead	4	Eye Exam	8	Flu Shots	37	COVID-19	81	Glaucoma	0	Prostate	7							GRAND TOTAL	841
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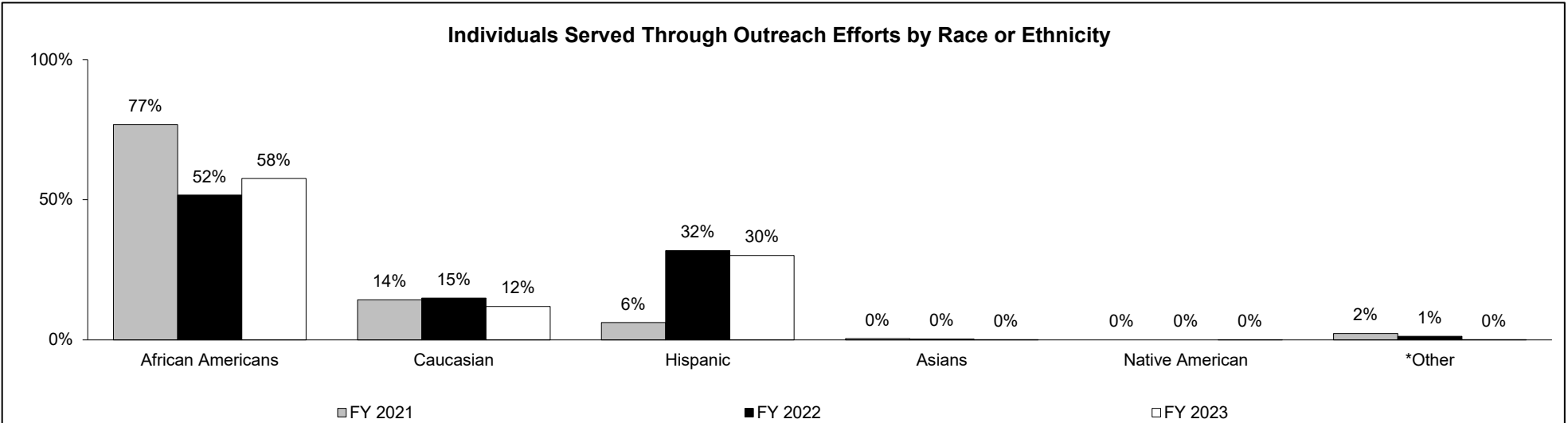
PROGRAM DESCRIPTION

Department of Health and Senior Services	HB Section(s): 10.765
Minority Health Initiatives	
Program is found in the following core budget(s): Minority Health Initiatives	

2a. Provide an activity measure(s) for the program. (continued)



*Increased community engagement activity with faith-based community in FY 2022 is attributed to 4 faith-based conferences with large attendance: one had 7,000 due to both in-person and virtual access, and 3 had a combined total of 938 individuals served (breakdown of: 500, 266, and 172). Decreased activity in FY 2023 is attributed to a cautious return to in-person events by faith-based organizations.

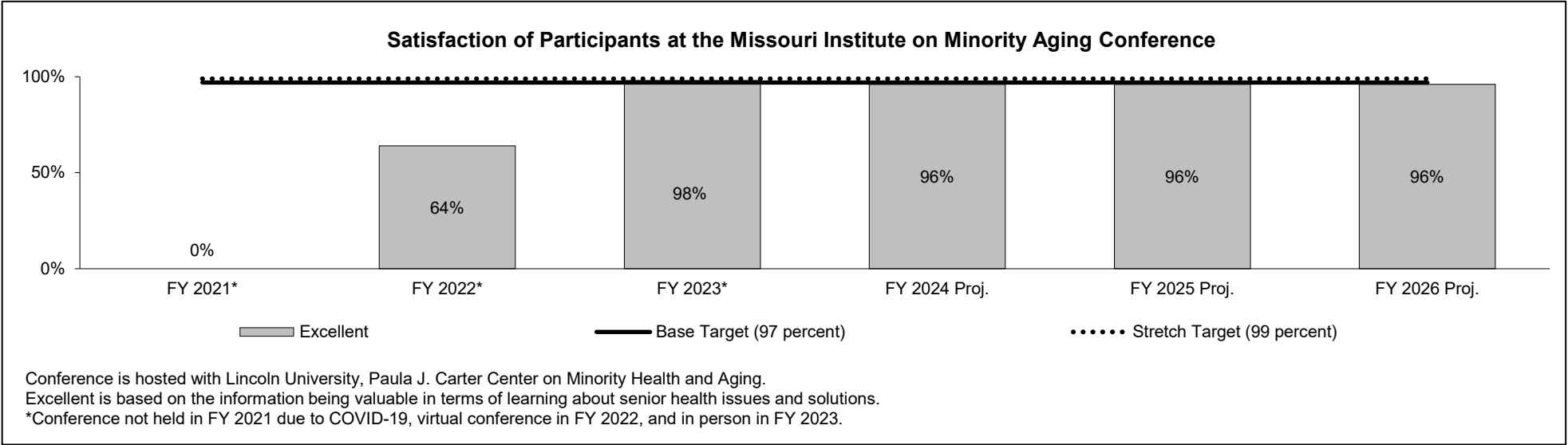


*Other includes: Bosnian, Korean, Liberian, and indigenous races or ethnicities.

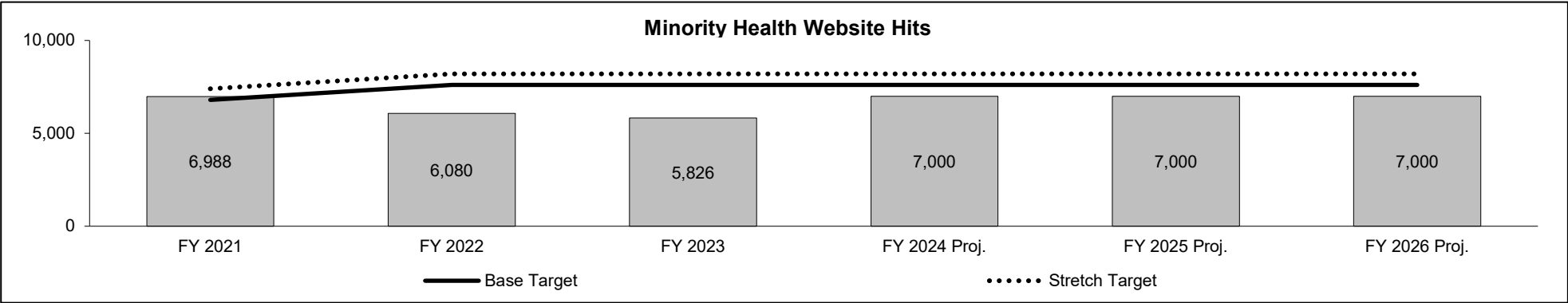
PROGRAM DESCRIPTION

Department of Health and Senior Services	HB Section(s): 10.765
Minority Health Initiatives	
Program is found in the following core budget(s): Minority Health Initiatives	

2b. Provide a measure(s) of the program's quality.



2c. Provide a measure(s) of the program's impact.



PROGRAM DESCRIPTION

Department of Health and Senior Services HB Section(s): 10.765

Minority Health Initiatives

Program is found in the following core budget(s): Minority Health Initiatives

2d. Provide a measure(s) of the program's efficiency.

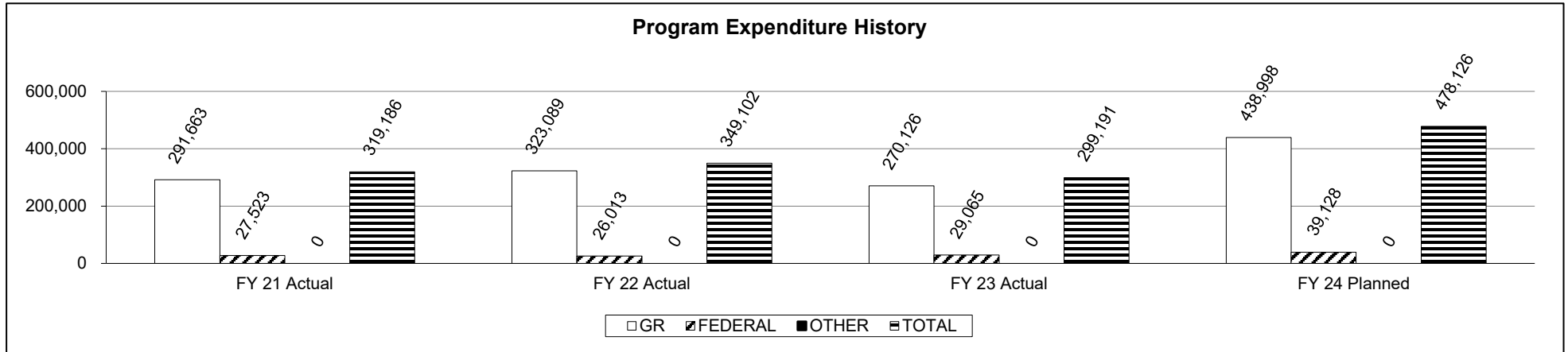
Individuals Served By Regional Community Engagement

	FY 2021	FY 2022	FY 2023	FY 2024 Proj.**	FY 2025 Proj.**	FY 2026 Proj.**
Central	899	839	1,025	1,200	1,200	1,200
Eastern	15,781	41,310	71,375	30,000	30,000	30,000
Northeast	0	0	0	150	150	150
Southeast	14,540	7,971	1063*	1,100	1,100	1,100
Southwest	1,500	1,153	63*	1,200	1,200	1,200
Western	45,086	31,099	2,573	30,000	30,000	30,000

*The Southwest and Southeast regions of the state held fewer community engagement activities.

**Projections are conservative as community engagement continues to increase from the pandemic.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



PROGRAM DESCRIPTION

Department of Health and Senior Services	HB Section(s): <u>10.765</u>
Minority Health Initiatives	
Program is found in the following core budget(s): Minority Health Initiatives	
4. What are the sources of the "Other " funds? Not applicable.	
5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.) Section 192.083, RSMo.	
6. Are there federal matching requirements? If yes, please explain. No.	
7. Is this a federally mandated program? If yes, please explain. No.	

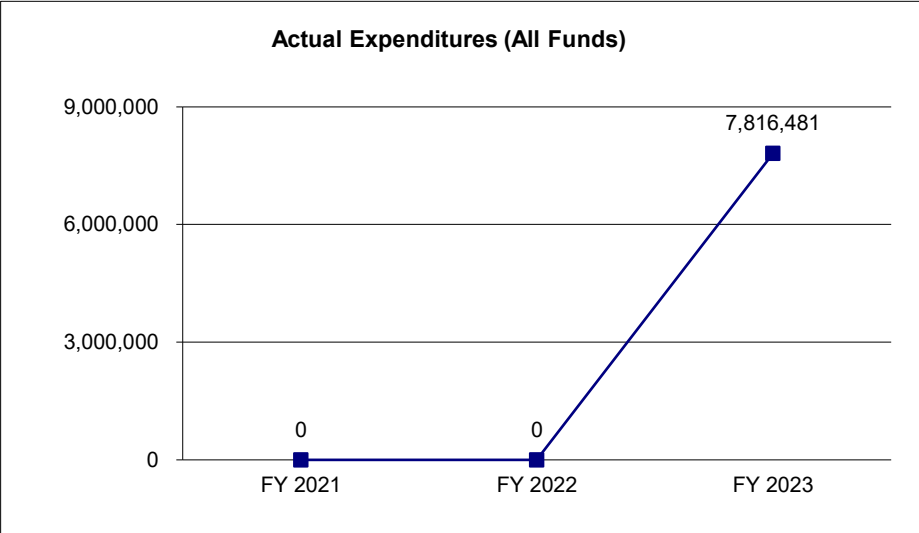
CORE DECISION ITEM

Health and Senior Services					Budget Unit 58243C				
Community and Public Health									
Core - Women's Health and Wellness					HB Section 10.770				
1. CORE FINANCIAL SUMMARY									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	216,260	1,377,839	0	1,594,099	PS	216,260	1,377,839	0	1,594,099
EE	6,599,585	682,238	354,916	7,636,739	EE	6,599,585	682,238	354,916	7,636,739
PSD	4,354,091	5,386,119	0	9,740,210	PSD	4,354,091	5,386,119	0	9,740,210
TRF	0	0	0	0	TRF	0	0	0	0
Total	11,169,936	7,446,196	354,916	18,971,048	Total	11,169,936	7,446,196	354,916	18,971,048
FTE	3.38	20.58	0.00	23.96	FTE	3.38	20.58	0.00	23.96
Est. Fringe	131,364	822,612	0	953,976	Est. Fringe	131,364	822,612	0	953,976
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.				
Federal Funds: Department of Health and Senior Services Federal (0143).									
Other Funds: Health Initiatives (0275); and Opioid Addiction Treatment and Recovery Fund (0705).									

CORE DECISION ITEM

Health and Senior Services	Budget Unit <u>58243C</u>
Community and Public Health	
Core - Women's Health and Wellness	HB Section <u>10.770</u>
2. CORE DESCRIPTION	
<p>Women's health and wellness initiatives serve to protect and improve the health of women and families by coordinating programs and activities across the state. The Department of Health and Senior Services (DHSS) directs programs focused on improving health and safety outcomes for women. The initiatives include maternal mortality review and prevention, maternal morbidity prevention, sexual violence prevention and response, family planning services, and health education and awareness. Some of the specific programs and activities include:</p> <ul style="list-style-type: none"> • The Extended Women's Health Services Program covers family planning-related services, pregnancy testing, sexually transmitted disease testing and treatment (including pap tests and pelvic exams), and follow-up services covered by MO HealthNet for uninsured women who are 18-55 years of age that meet income guidelines. • The Sexual Violence Prevention and Response Program focuses on preventing sexual violence perpetration and providing telehealth support to hospitals for forensic exams. Preventing violence is accomplished by using a public health approach to decrease sexual violence risk factors and increase sexual violence protective factors. Contractors implement and evaluate evidence-based sexual violence prevention strategies that include bystander intervention, changing the built environment, and building community connectedness. Additionally, work is focused on strengthening economic supports for women and families and establishing and revising sexual harassment and violence prevention policies and procedures in the workplace. The response program is a statewide network available to hospitals that do not currently have sexual assault nurse examiner coverage. Telehealth services are available to providers at these hospitals to assist their medical providers with conducting a forensic exam. • The Pregnancy Associated Mortality Review (PAMR) Program abstracts data on all women who die during pregnancy and up to one year following the end of the pregnancy. The purpose of the PAMR is to examine the medical and non-medical circumstances of these deaths and to identify gaps in services and systems that should be improved to prevent future deaths. The PAMR can also identify strengths in the system of care that should be supported or expanded to improve maternal outcomes. • Maternal Mortality Prevention Plan: These efforts include developing maternal quality control protocols to standardize practices at all birth facilities across the state; establishing a perinatal health access collaborative to allow general practitioners in underserved areas to consult with medical specialists elsewhere in the state; standardizing maternal care provider trainings, including screening and treating cardiovascular disorders associated with pregnancy and the treatment of mental health conditions or substance use disorders during and after pregnancy; developing and implementing best practices for postpartum plans of care; and improving maternal health data collection and reporting. • This funding also includes some initiatives of the Title V Maternal and Child Health (MCH) Services Block Grant which assures a maternal-child public health system with a variety of services, programs, and initiatives that addresses the needs of Missouri's mothers, infants, children, adolescents, and families, including children and youth with special health needs (CYSHCN). 	

CORE DECISION ITEM

Health and Senior Services					Budget Unit 58243C									
Community and Public Health														
Core - Women's Health and Wellness					HB Section 10.770									
3. PROGRAM LISTING (list programs included in this core funding)														
Baby and Me Tobacco Free Program-Telehealth					MCH Warmline									
Cora Faith Walker Doula Training Program					Pregnancy Assistance Information									
Doula Services of Springfield					Prenatal Care Clinic in Kansas City									
Early Childhood Initiatives					Sexual Assault Forensic Exams via Telehealth Statewide Network									
Extended Women’s Health Services					(SAFE-T Network)									
Maternal Autopsy Reimbursement					Sexual Violence Prevention and Response Program									
Maternal Health Multisector Action Network					Title V Maternal Child Health Services Block Grant									
Maternal Mortality / PAMR / Perinatal Quality Collaborative					Women’s Health Council									
Maternal Neonatal Levels of Care					Women’s Health Initiatives									
MCH Navigator Project														
4. FINANCIAL HISTORY														
	FY 2021 Actual	FY 2022 Actual	FY 2023 Actual	FY 2024 Current Yr.	<div>Actual Expenditures (All Funds)</div>  <table><thead><tr><th>Fiscal Year</th><th>Actual Expenditures</th></tr></thead><tbody><tr><td>FY 2021</td><td>0</td></tr><tr><td>FY 2022</td><td>0</td></tr><tr><td>FY 2023</td><td>7,816,481</td></tr></tbody></table>		Fiscal Year	Actual Expenditures	FY 2021	0	FY 2022	0	FY 2023	7,816,481
Fiscal Year	Actual Expenditures													
FY 2021	0													
FY 2022	0													
FY 2023	7,816,481													
Appropriation (All Funds)	0	0	24,125,767	14,649,861										
Less Reverted (All Funds)	0	0	(148,696)	0										
Less Restricted (All Funds)*	0	0	0	0										
Budget Authority (All Funds)	0	0	23,977,071	14,649,861										
Actual Expenditures (All Funds)	0	0	7,816,481	N/A										
Unexpended (All Funds)	0	0	16,160,590	N/A										
Unexpended, by Fund:														
General Revenue	0	0	10,300,924	N/A										
Federal	0	0	5,505,288	N/A										
Other	0	0	354,378	N/A										
Reverted includes the statutory three percent reserve amount (when applicable).														
Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).														
NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.														

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES WOMENS HEALTH AND WELLNESS

5. CORE RECONCILIATION DETAIL

			Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS									
Core Reallocation	873	5171	PS	1.24	94,542	0	0	94,542	CORE reallocations for programmatic alignment.
Core Reallocation	873	5783	PS	20.58	0	1,377,839	0	1,377,839	CORE reallocations for programmatic alignment.
Core Reallocation	873	5769	PS	1.00	50,728	0	0	50,728	CORE reallocations for programmatic alignment.
Core Reallocation	873	5767	PS	1.14	70,990	0	0	70,990	CORE reallocations for programmatic alignment.
Core Reallocation	873	5773	EE	0.00	500,000	0	0	500,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5774	EE	0.00	1,000,000	0	0	1,000,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5174	EE	0.00	0	2,025	0	2,025	CORE reallocations for programmatic alignment.
Core Reallocation	873	5772	EE	0.00	1,500,000	0	0	1,500,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5785	EE	0.00	0	43,460	0	43,460	CORE reallocations for programmatic alignment.
Core Reallocation	873	5786	EE	0.00	0	495,000	0	495,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5787	EE	0.00	0	0	4,916	4,916	CORE reallocations for programmatic alignment.
Core Reallocation	873	5788	EE	0.00	0	0	350,000	350,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5784	EE	0.00	0	141,753	0	141,753	CORE reallocations for programmatic alignment.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES WOMENS HEALTH AND WELLNESS

5. CORE RECONCILIATION DETAIL

				Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS										
Core Reallocation	873	5770	EE		0.00	2,159,585	0	0	2,159,585	CORE reallocations for programmatic alignment.
Core Reallocation	873	5771	EE		0.00	1,000,000	0	0	1,000,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5778	EE		0.00	350,000	0	0	350,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5768	EE		0.00	90,000	0	0	90,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5768	PD		0.00	90,000	0	0	90,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5174	PD		0.00	0	316,258	0	316,258	CORE reallocations for programmatic alignment.
Core Reallocation	873	5836	PD		0.00	0	4,321,187	0	4,321,187	CORE reallocations for programmatic alignment.
Core Reallocation	873	5786	PD		0.00	0	746,674	0	746,674	CORE reallocations for programmatic alignment.
Core Reallocation	873	5785	PD		0.00	0	2,000	0	2,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5782	PD		0.00	3,289,091	0	0	3,289,091	CORE reallocations for programmatic alignment.
Core Reallocation	873	5781	PD		0.00	250,000	0	0	250,000	CORE reallocations for programmatic alignment.
Core Reallocation	873	5780	PD		0.00	225,000	0	0	225,000	CORE reallocations for programmatic alignment.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES WOMENS HEALTH AND WELLNESS

5. CORE RECONCILIATION DETAIL

		Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS								
Core Reallocation	873 5779	PD	0.00	500,000	0	0	500,000	CORE reallocations for programmatic alignment.
NET DEPARTMENT CHANGES			23.96	11,169,936	7,446,196	354,916	18,971,048	
DEPARTMENT CORE REQUEST								
		PS	23.96	216,260	1,377,839	0	1,594,099	
		EE	0.00	6,599,585	682,238	354,916	7,636,739	
		PD	0.00	4,354,091	5,386,119	0	9,740,210	
		Total	23.96	11,169,936	7,446,196	354,916	18,971,048	
GOVERNOR'S RECOMMENDED CORE								
		PS	23.96	216,260	1,377,839	0	1,594,099	
		EE	0.00	6,599,585	682,238	354,916	7,636,739	
		PD	0.00	4,354,091	5,386,119	0	9,740,210	
		Total	23.96	11,169,936	7,446,196	354,916	18,971,048	

DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
WOMENS HEALTH AND WELLNESS									
CORE									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	216,260	3.38	216,260	3.38	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	1,377,839	20.58	1,377,839	20.58	
TOTAL - PS	0	0.00	0	0.00	1,594,099	23.96	1,594,099	23.96	
EXPENSE & EQUIPMENT									
GENERAL REVENUE	0	0.00	0	0.00	6,599,585	0.00	6,599,585	0.00	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	682,238	0.00	682,238	0.00	
HEALTH INITIATIVES	0	0.00	0	0.00	4,916	0.00	4,916	0.00	
OPIOID TREATMENT AND RECOVERY	0	0.00	0	0.00	350,000	0.00	350,000	0.00	
TOTAL - EE	0	0.00	0	0.00	7,636,739	0.00	7,636,739	0.00	
PROGRAM-SPECIFIC									
GENERAL REVENUE	0	0.00	0	0.00	4,354,091	0.00	4,354,091	0.00	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	5,386,119	0.00	5,386,119	0.00	
TOTAL - PD	0	0.00	0	0.00	9,740,210	0.00	9,740,210	0.00	
TOTAL	0	0.00	0	0.00	18,971,048	23.96	18,971,048	23.96	
Pay Plan - 0000012									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	53,001	0.00	
OPIOID TREATMENT AND RECOVERY	0	0.00	0	0.00	0	0.00	3,365	0.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	56,366	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	56,366	0.00	
ERASE Maternal Mortality - 1580010									
PERSONAL SERVICES									
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	59,209	1.00	0	0.00	
TOTAL - PS	0	0.00	0	0.00	59,209	1.00	0	0.00	
EXPENSE & EQUIPMENT									
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	859	0.00	0	0.00	
TOTAL - EE	0	0.00	0	0.00	859	0.00	0	0.00	
TOTAL	0	0.00	0	0.00	60,068	1.00	0	0.00	

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DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
WOMENS HEALTH AND WELLNESS									
Fetal Infant Mortality Review - 1580025									
EXPENSE & EQUIPMENT									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	183,926	0.00	
TOTAL - EE	0	0.00	0	0.00	0	0.00	183,926	0.00	
PROGRAM-SPECIFIC									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	1,648,000	0.00	
TOTAL - PD	0	0.00	0	0.00	0	0.00	1,648,000	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	1,831,926	0.00	
SAFE-T Grant - 1580026									
PERSONAL SERVICES									
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	0	0.00	45,000	0.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	45,000	0.00	
EXPENSE & EQUIPMENT									
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	0	0.00	555,000	0.00	
TOTAL - EE	0	0.00	0	0.00	0	0.00	555,000	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	600,000	0.00	
RN/Surveyor Salary Adjustment - 1580027									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	17,145	0.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	17,145	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	17,145	0.00	
Comprehensive Care - 1580031									
PERSONAL SERVICES									
OPIOID TREATMENT AND RECOVERY	0	0.00	0	0.00	0	0.00	105,150	2.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	105,150	2.00	

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DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
WOMENS HEALTH AND WELLNESS									
Comprehensive Care - 1580031									
EXPENSE & EQUIPMENT									
OPIOID TREATMENT AND RECOVERY	0	0.00	0	0.00	0	0.00	4,213,582	0.00	
TOTAL - EE	0	0.00	0	0.00	0	0.00	4,213,582	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	4,318,732	2.00	
GRAND TOTAL	\$0	0.00	\$0	0.00	\$19,031,116	24.96	\$25,795,217	25.96	

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58243C BUDGET UNIT NAME: Women's Health and Wellness HOUSE BILL SECTION: 10.770	DEPARTMENT: Department of Health and Senior Services (DHSS) DIVISION: Division of Community and Public Health (DCPH)
1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.	
DEPARTMENT REQUEST	
<p>Based on the recommendations of the Legislative body in previous years, DHSS has worked to create and breakdown CORES within DCPH in order to provide more transparency. The Department requests fifty percent (50%) flexibility between House Bills 10.700, 10.705, 10.710, 10.715, 10.720, 10.725, 10.730, 10.735, 10.740, 10.745, 10.750, 10.755, 10.760, 10.765, 10.770, and 10.775 in order to ensure continuity of operations during the transition.</p> <p>In addition, the Department requests ten percent (10%) flexibility in House Bill section 10.770 between appropriations 5771, 5772, 5773, 5774, 5778, and 5779 between this section. This flexibility was previously granted by the Legislature in FY 2024 under House Bill 10.732. The Department's requested flex will allow the Department to utilize available resources in the most effective manner.</p>	
2. Estimate how much flexibility will be used for the budget year. How much flexibility was used in the Prior Year Budget and the Current Year Budget? Please specify the amount.	
PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT YEAR ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
Not applicable.	Not applicable.
BUDGET REQUEST ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED	
Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of Governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The Department's requested flex will allow the Department to utilize available resources in the most effective manner as the need arises. Flexibility between House bill sections will allow for transparency. The Department cannot predict how much flexibility will be utilized.	
3. Please explain how flexibility was used in the prior and/or current years.	
PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
Not applicable.	Not applicable.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
WOMENS HEALTH AND WELLNESS								
CORE								
PROJECT SPECIALIST	0	0.00	0	0.00	32,747	0.63	32,747	0.63
LEAD ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	15,594	0.29	15,594	0.29
PROGRAM ASSISTANT	0	0.00	0	0.00	127,207	2.51	127,207	2.51
ASSOC RESEARCH/DATA ANALYST	0	0.00	0	0.00	7,192	0.11	7,192	0.11
RESEARCH/DATA ANALYST	0	0.00	0	0.00	15,625	0.26	15,625	0.26
SENIOR RESEARCH/DATA ANALYST	0	0.00	0	0.00	43,185	0.64	43,185	0.64
REGISTERED NURSE	0	0.00	0	0.00	527,838	7.57	527,838	7.57
REGISTERED NURSE SPEC/SPV	0	0.00	0	0.00	183,241	2.41	183,241	2.41
NURSE MANAGER	0	0.00	0	0.00	34,912	0.29	34,912	0.29
SENIOR EPIDEMIOLOGIST	0	0.00	0	0.00	3,240	0.04	3,240	0.04
PUBLIC HEALTH PROGRAM ASSOC	0	0.00	0	0.00	107,144	2.14	107,144	2.14
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	116,751	2.26	116,751	2.26
SR PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	161,078	2.40	161,078	2.40
PUBLIC HEALTH PROGRAM MANAGER	0	0.00	0	0.00	218,345	2.41	218,345	2.41
TOTAL - PS	0	0.00	0	0.00	1,594,099	23.96	1,594,099	23.96
TRAVEL, IN-STATE	0	0.00	0	0.00	70,231	0.00	70,231	0.00
TRAVEL, OUT-OF-STATE	0	0.00	0	0.00	2,890	0.00	2,890	0.00
SUPPLIES	0	0.00	0	0.00	49,495	0.00	49,495	0.00
PROFESSIONAL DEVELOPMENT	0	0.00	0	0.00	42,163	0.00	42,163	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	2,000	0.00	2,000	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	7,458,810	0.00	7,458,810	0.00
M&R SERVICES	0	0.00	0	0.00	5,157	0.00	5,157	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	1,500	0.00	1,500	0.00
OTHER EQUIPMENT	0	0.00	0	0.00	487	0.00	487	0.00
MISCELLANEOUS EXPENSES	0	0.00	0	0.00	4,006	0.00	4,006	0.00
TOTAL - EE	0	0.00	0	0.00	7,636,739	0.00	7,636,739	0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
WOMENS HEALTH AND WELLNESS								
CORE								
PROGRAM DISTRIBUTIONS	0	0.00	0	0.00	9,740,210	0.00	9,740,210	0.00
TOTAL - PD	0	0.00	0	0.00	9,740,210	0.00	9,740,210	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$18,971,048	23.96	\$18,971,048	23.96
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$11,169,936	3.38	\$11,169,936	3.38
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$7,446,196	20.58	\$7,446,196	20.58
OTHER FUNDS	\$0	0.00	\$0	0.00	\$354,916	0.00	\$354,916	0.00

PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.770</u>
Women's Health and Wellness	
Program is found in the following core budget(s): Women's Health and Wellness	
<p>1a. What strategic priority does this program address? Build and Strengthen Partnerships, Use Clear and Consistent Communication to Build Trust, and Expand Access to Services</p> <p>1b. What does this program do? Women's Health Initiatives protects and improves the health of women, infants, children, young adults, and families by coordinating programs and activities across the state. These programs and activities include:</p> <ul style="list-style-type: none"> • Pregnancy Associated Mortality Reviews - Analyzes causes of maternal deaths and develops intervention recommendations to prevent such deaths. • Sexual Violence Prevention and Response Program - This program contracts with public universities and non-profit organizations to implement evidence-based sexual violence prevention programs with communities, students, teachers, staff, and parents. • Maternal Child Health (MCH) Services Program - Administered by contracting with local public health agencies (LPHAs) to support their leadership role in building and expanding community-based systems to respond to priority health issues, ensure access to quality Maternal and Child Health (MCH) services, reduce health disparities, and promote health for infants, children, adolescents, and women of child-bearing age. • Title V MCH Services Block Grant - Through supporting and partnering with programs and initiatives across the Department and programs in the Office of Childhood at Department of Elementary and Secondary Education (DESE) (Home Visiting, Early Childhood Coordinated Systems, Safe Sleep/Safe Cribs, Child Care Health Consultation, and Child Care Inclusion Services) and collaborating with LPHAs and other external public health partners and MCH stakeholders, the Title V MCH Services Block Grant assures a maternal-child public health system with a variety of services, programs, and initiatives that addresses the needs of Missouri's women of childbearing age, mothers, infants, children, adolescents, and families, including children and youth with special health needs (CYSHCN). These services can be broadly grouped into three main categories: direct services, enabling services, and preventive and primary care services for all pregnant women, mothers, and infants up to age one. • Maternal Mortality Prevention Plan - This plan will develop maternal quality control protocols to standardize practices at all birth facilities across the state; establish a perinatal health access collaborative to allow general practitioners in underserved areas to consult with medical specialists elsewhere in the state; standardize maternal care provider trainings, including screening and treating cardiovascular disorders associated with pregnancy and the treatment of mental health conditions or substance use disorders during and after pregnancy; develop and implement best practices for postpartum plans of care; and develop a MCH Dashboard. 	

PROGRAM DESCRIPTION

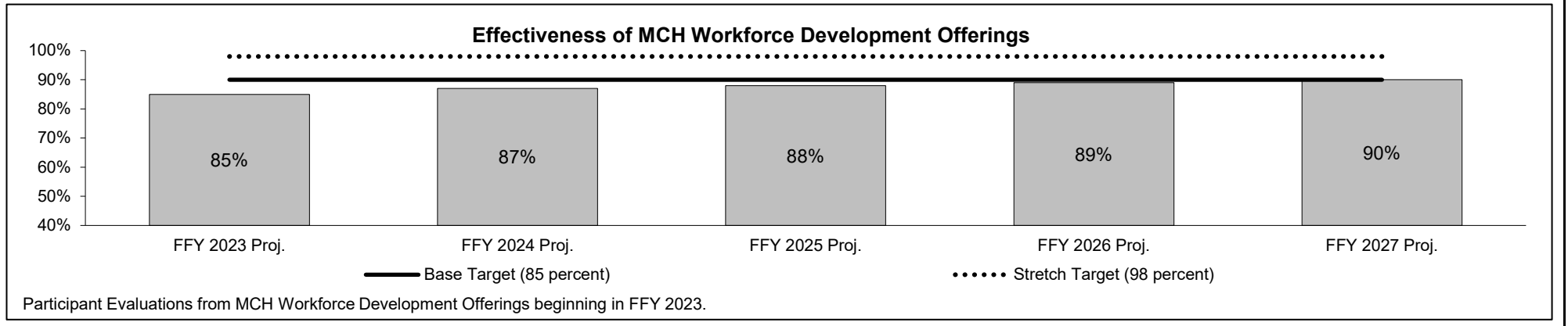
Health and Senior Services	HB Section(s): <u>10.770</u>
Women's Health and Wellness	
Program is found in the following core budget(s): Women's Health and Wellness	

2a. Provide an activity measure(s) for the program.

	FFY 2021	FFY 2022	FFY 2023 Proj.	FFY 2024 Proj.	FFY 2025 Proj.	FFY2026 Proj.
LPHA's Served Through MCH Services	114	111*	111*	111*	111*	111*
Individuals Served by Title V**	69,830***	75,568	80,000	85,000	90,000	95,000
Trainings Provided by Contracted Entities Implementing Violence Prevention Strategies****	292*****	264*****	410	500	500	500
<p>*FFY 2022 to FFY 2026 Projections lower due to ongoing impact of COVID-19 pandemic on LPHA subcontract capacity; MCH Services contract transitions from a three-year to five-year work plan October 1, 2021, and three LPHAs chose not to accept the contract for the next five years.</p> <p>**Direct Services, Enabling Services, and Public Health Services and Systems.</p> <p>***FFY 2021 Number of individuals served by Title V are significantly lower due to impact of COVID-19 pandemic. FFY 2022 to FFY 2026 projections represent anticipated gradual return to pre-pandemic service levels.</p> <p>****Reporting provided on grant cycle reporting August to July.</p> <p>*****FY 2021 lower due to COVID-19. Program expects increased trainings in future years due to change in programming structure.</p>						

	FFY 2023 Proj.	FFY 2024 Proj.	FFY 2025 Proj.	FFY2026 Proj.
Number of Tobacco Cessation Sessions	59	180	220	250
Number of Free Prenatal and Postpartum Visits	343	720	720	750
Prenatal Care Program and Tobacco Cessation Services started in January 2023.				

2b. Provide a measure(s) of the program's quality.



PROGRAM DESCRIPTION

Health and Senior Services

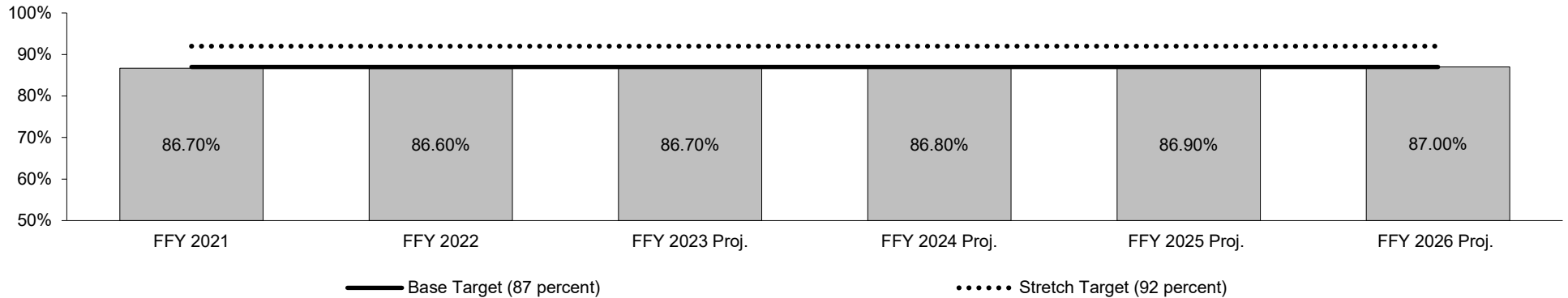
HB Section(s): 10.770

Women's Health and Wellness

Program is found in the following core budget(s): Women's Health and Wellness

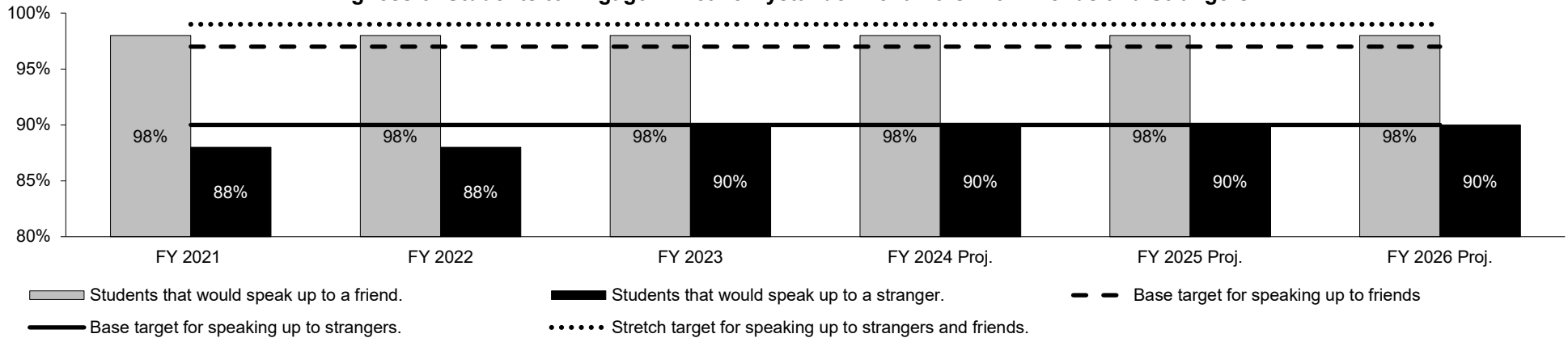
2c. Provide a measure(s) of the program's impact.

Title V MCH Services Block Grant - Women who Reported a Routine Check Up Within the Past Two Years



Data Source: Behavioral Risk Factor Surveillance Systems (BRFSS) - CDC telephone surveys that collect self-reported data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services.

Willingness of Students to Engage in Active Bystander Behaviors with Friends and Strangers



Data is collected annually from the Missouri Assessment of College Health Behaviors, measuring the reported willingness of students to speak up when they hear a friend or stranger coercing someone to have sex. Data reported is from survey collected in the prior year.

PROGRAM DESCRIPTION

Health and Senior Services

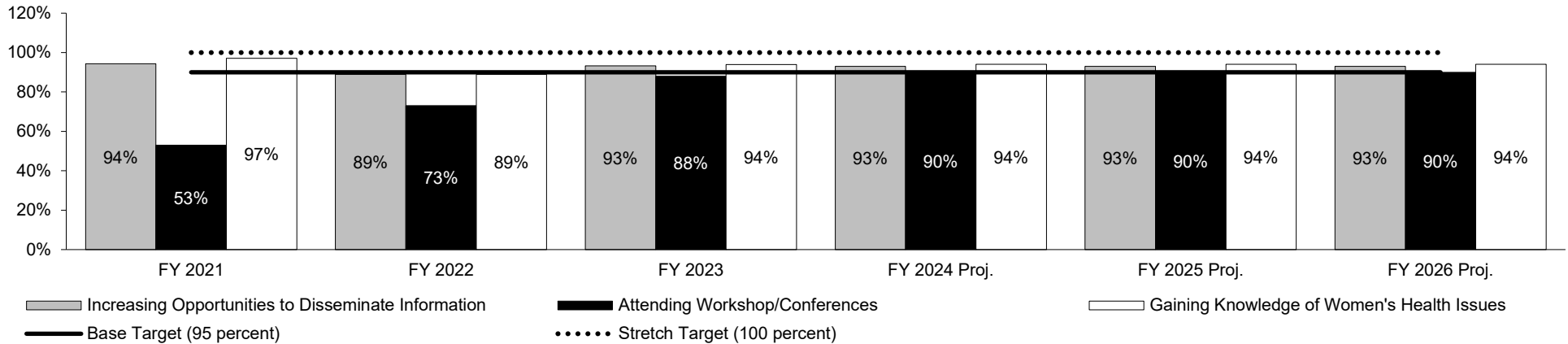
HB Section(s): 10.770

Women's Health and Wellness

Program is found in the following core budget(s): Women's Health and Wellness

2c. Provide a measure(s) of the program's impact. (continued)

Top Three Reported Benefits from Information Provided by Women's Health Listserv



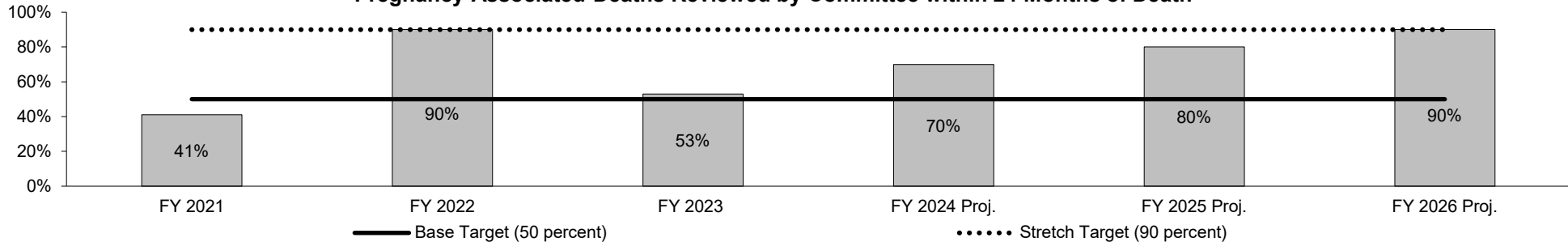
Base Target: Increase the percentage of Listserv members who reported benefits from information provided to 95 percent in all areas.

Stretch Target: Increase the percentage of Listserv members who reported benefits from information provided to 100 percent in all areas.

The Women's Health Listserv provides women's health information, resources, and opportunities to interested individuals such as local public health staff, nurses, physicians, educators, and other health professionals. Data is collected from an annual survey of all Listserv members.

2d. Provide a measure(s) of the program's efficiency.

Pregnancy-Associated Deaths Reviewed by Committee within 24 Months of Death



The Pregnancy Associated Mortality Review (PAMR) Program reviews and prepares reports for the PAMR committee to review for every pregnancy associated death in the state. The PAMR program saw a huge improvement in 2022 due to process changes (use of provisional death and birth certificates and abstraction/review in order of date of death). Numbers included are from the program report to the CDC in that year.

PROGRAM DESCRIPTION

Health and Senior Services

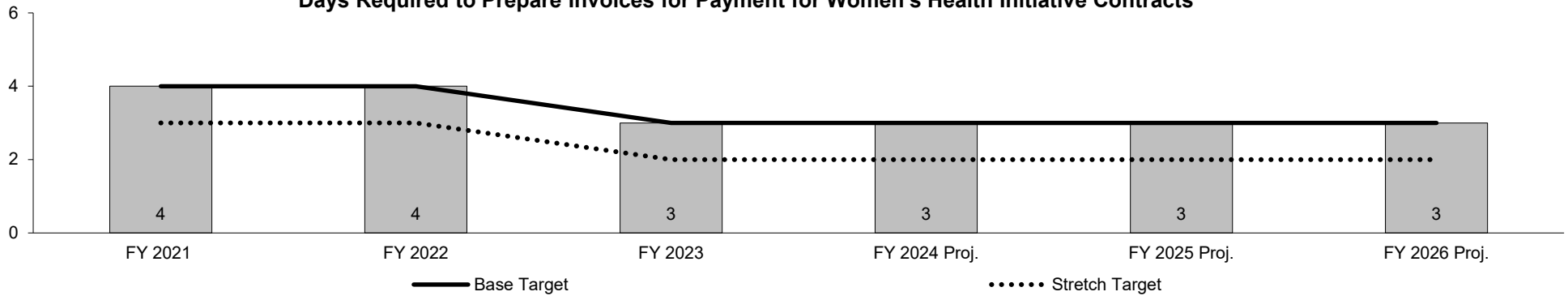
HB Section(s): 10.770

Women's Health and Wellness

Program is found in the following core budget(s): Women's Health and Wellness

2d. Provide a measure(s) of the program's efficiency. (continued)

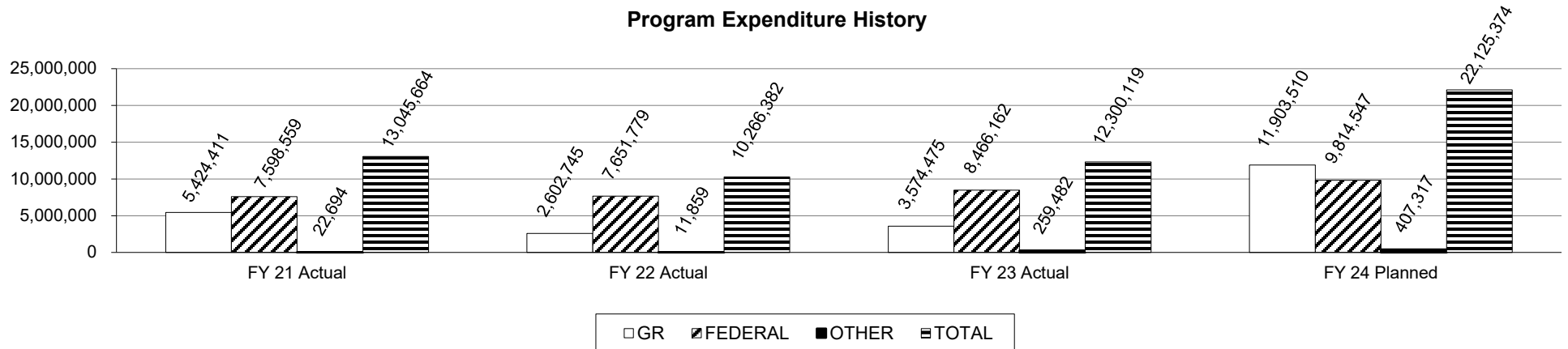
Days Required to Prepare Invoices for Payment for Women's Health Initiative Contracts



WHI processes invoices for the Rape Prevention and Education Grant. The move to remote working due to COVID-19 resulted in a shift in invoice format to electronic only. This saved time in processing and resulted in fewer days for invoice processing.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)

Program Expenditure History



PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.770</u>
Women's Health and Wellness	
Program is found in the following core budget(s): <u>Women's Health and Wellness</u>	
4. What are the sources of the "Other " funds? Health Initiatives (0275).	
5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.) Breast and Cervical Cancer Mortality Prevention Act of 1990, PL.354, 42 USC Section 247b(k)(2).	
6. Are there federal matching requirements? If yes, please explain. Yes. The MCH Services Block Grant requires a three dollar non-federal to a four dollar federal match and maintenance of effort.	
7. Is this a federally mandated program? If yes, please explain. No.	

NEW DECISION ITEM

Health and Senior Services					Budget Unit 58243C				
Division of Community and Public Health									
ERASE Maternal Mortality DI# 1580010					HB Section 10.770				
1. AMOUNT OF REQUEST									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	59,209	0	59,209	PS	0	0	0	0
EE	0	21,043	0	21,043	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	80,252	0	80,252	Total	0	0	0	0
FTE	0.00	1.00	0.00	1.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	37,086	0	37,086	Est. Fringe	0	0	0	0
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				
Federal Funds: Department of Health and Senior Services Federal Fund (0143).									
2. THIS REQUEST CAN BE CATEGORIZED AS:									
<input type="checkbox"/>	New Legislation			<input type="checkbox"/>	New Program			<input type="checkbox"/>	Fund Switch
<input type="checkbox"/>	Federal Mandate			<input checked="" type="checkbox"/>	Program Expansion			<input type="checkbox"/>	Cost to Continue
<input type="checkbox"/>	GR Pick-Up			<input type="checkbox"/>	Space Request			<input type="checkbox"/>	Equipment Replacement
<input type="checkbox"/>	Pay Plan			<input type="checkbox"/>	Other:				

NEW DECISION ITEM

Health and Senior Services <hr/> Division of Community and Public Health <hr/> ERASE Maternal Mortality DI# 1580010	Budget Unit <u>58243C</u> HB Section <u>10.770</u>
3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.	
<p>This is to request appropriation authority for funds that will be received in September 2023 to support ongoing efforts to reduce maternal mortality by conducting informant interviews to expand the understanding of the causes and context of and prevent maternal mortality in Missouri. The Department currently receives the Enhancing Reviews and Surveillance to Eliminate Maternal Mortality (ERASE MM) grant from the Center for Disease Control (CDC). This request will provide appropriation authority to spend funds from the federal grant. There is no match needed. One (1.00) new FTE, a Public Health Program Specialist, is also requested to:</p> <ul style="list-style-type: none"> • Develop Pregnancy-Associated Mortality Review (PAMR) informant interview policies/protocols and consent forms. • Adapt interview questions from CDC resources. • Emphasizing data collection. • Develop bereavement support and resources. <p>By implementing these strategies, Missouri's PAMR program will improve the understanding of the cause and context of the deaths reviewed by the PAMR board. They will conduct interviews, prepare information from informant interviews for the PAMR committee review, and serve as a subject matter expert in case review meetings. Informant interviews complement medical and social service record requests related to each case by incorporating family and community perspectives in committee review. An existing Registered Nurse position, will move ten percent of time and grant allocation from the Maternal Child Health grant to the ERASE MM grant to spend additional time on case abstraction and informant interviews.</p>	
4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)	
<p>Completing case review is a responsibility of the Department of Health and Services (DHSS), so it is appropriate for this additional step to be included in the Department's scope of work and not an external partner. The Department estimated the number of hours needed to develop policies and protocols, adapt resources and interview questions, identify resources, and implement informant interviews for maternal mortality cases in Missouri would take at least 2,300 hours to complete.</p>	

NEW DECISION ITEM

Health and Senior Services			Budget Unit		58243C				
Division of Community and Public Health									
ERASE Maternal Mortality			DI# 1580010		HB Section		10.770		
5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.									
	Dept Req GR	Dept Req GR	Dept Req FED	Dept Req FED	Dept Req OTHER	Dept Req OTHER	Dept Req TOTAL	Dept Req TOTAL	Dept Req One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Public Health Program Spec (19PH20)	0	0.00	52,728	1.00	0	0.00	52,728	1.00	0
Registered Nurse (05NU30)	0	0.00	6,481	0.00	0	0.00	6,481	0.00	0
Total PS	0	0.00	59,209	1.00	0	0.00	59,209	1.00	0
Travel In-State (140)	0		2,287		0		2,287		0
Supplies (190)	0		4,385		0		4,385		0
Communication Services (340)	0		7,125		0		7,125		0
Professional Services (400)	0		5,672		0		5,672		0
M&R Services (430)	0		1,574		0		1,574		0
Total EE	0		21,043		0		21,043		0
Grand Total	0	0.00	80,252	1.00	0	0.00	80,252	1.00	0
	Gov Rec GR	Gov Rec GR	Gov Rec FED	Gov Rec FED	Gov Rec OTHER	Gov Rec OTHER	Gov Rec TOTAL	Gov Rec TOTAL	Gov Rec One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Public Health Program Spec (19PH20)	0	0.00	0	0.00	0	0.00	0	0.00	0
Registered Nurse (05NU30)	0	0.00	0	0.00	0	0.00	0	0.00	0
Total PS	0	0.00	0	0.00	0	0.00	0	0.00	0
Travel In-State (140)	0		0		0		0		0
Supplies (190)	0		0		0		0		0
Communication Services (340)	0		0		0		0		0
Professional Services (400)	0		0		0		0		0
M&R Services (430)	0		0		0		0		0
Total EE	0		0		0		0		0
Grand Total	0	0.00	0	0.00	0	0.00	0	0.00	0

NEW DECISION ITEM

Health and Senior Services	Budget Unit <u>58243C</u>
Division of Community and Public Health	
ERASE Maternal Mortality DI# 1580010	HB Section <u>10.770</u>
6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)	
6a. Provide an activity measure for the program. The activity measure for the program will be the number of informant interviews conducted.	
6b. Provide a measure of the program's quality. The program's quality will be measured by the reported experiences from informants after interview.	
6c. Provide a measure(s) of the program's impact. The program's impact will be measured by the percentage of cases identified as needing informant interview.	
6d. Provide a measure(s) of the program's efficiency. The measure for the program's efficiency will be the percentage of cases needing and receiving informant interviews within 24 months of death.	
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:	
The Department will develop and implement best practices for informant interviews based on guidance from the Centers for Disease Control and Prevention.	

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
WOMENS HEALTH AND WELLNESS								
ERASE Maternal Mortality - 1580010								
REGISTERED NURSE	0	0.00	0	0.00	6,481	0.00	0	0.00
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	52,728	1.00	0	0.00
TOTAL - PS	0	0.00	0	0.00	59,209	1.00	0	0.00
TRAVEL, IN-STATE	0	0.00	0	0.00	773	0.00	0	0.00
SUPPLIES	0	0.00	0	0.00	86	0.00	0	0.00
TOTAL - EE	0	0.00	0	0.00	859	0.00	0	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$60,068	1.00	\$0	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00		0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$60,068	1.00		0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00		0.00

NEW DECISION ITEM

Health and Senior Services					Budget Unit 58243C, 58025C				
Division of Community and Public Health									
State Fetal Infant Mortality Review (FIMR) Network DI# 1580025					HB Section 10.770, 10.605				
1. AMOUNT OF REQUEST									
	FY 2024 Budget Request					FY 2024 Governor's Recommendation			
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	183,926	0	0	183,926
PSD	0	0	0	0	PSD	1,648,000	0	0	1,648,000
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	0	0	0	Total	1,831,926	0	0	1,831,926
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				
2. THIS REQUEST CAN BE CATEGORIZED AS:									
<input type="checkbox"/> New Legislation	<input checked="" type="checkbox"/>	<input type="checkbox"/> New Program	<input type="checkbox"/> Fund Switch						
<input type="checkbox"/> Federal Mandate		<input type="checkbox"/> Program Expansion	<input type="checkbox"/> Cost to Continue						
<input type="checkbox"/> GR Pick-Up		<input type="checkbox"/> Space Request	<input type="checkbox"/> Equipment Replacement						
<input type="checkbox"/> Pay Plan		<input type="checkbox"/> Other: _____							

NEW DECISION ITEM

Health and Senior Services <hr/> Division of Community and Public Health <hr/> State Fetal Infant Mortality Review (FIMR) Network DI# 1580025	Budget Unit <u>58243C, 58025C</u> <hr/> HB Section <u>10.770, 10.605</u> <hr/>
3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.	
<p>This funding request is to establish and support a statewide Fetal Infant Mortality Review (FIMR) program, which would also create a network of ten regional FIMR teams. FIMR is an evidence-based process to identify and analyze factors that contribute to fetal and infant death. FIMR teams are diverse, multidisciplinary groups of professionals who come together to examine confidential, de-identified individual cases of fetal and infant deaths from 24 weeks gestation through the 12 months after birth.</p> <p>Based on the National Fetal and Infant Mortality Review (NFIMR) Program model, the Missouri FIMR Program would be adapted as a network of regional FIMR teams, based on public health regions and covering geographic areas of interest representing multiple natural communities and directed by the Department of Health and Senior Services' (DHSS) Maternal Child Health (MCH) leadership team, to review all fetal and infant deaths from 24 weeks gestation through the first 12 months of life. The FIMR process would include:</p> <ul style="list-style-type: none"> • Case identification; • Medical records abstraction; • Home and family interviews; • Case reviews; • Recommendations for action. <p>The process would operate as a two-tiered system, with a Community Review Team (CRT) to conduct case reviews and a separate Community Action Team (CAT), charged with taking the recommendations of the CRT and putting them into action.</p> <p>Although the overall infant mortality rate in Missouri has declined over the last decade (compared to a rate of 6.4 at the end of 2012); significant disparities persist in infant mortality among different racial and ethnic groups, with a striking disparity between babies born to Black women and babies born to White or Asian women. The 2021 infant mortality rate in Missouri was highest for Non-Hispanic Black infants (12.2), compared to 4.6 for Non-Hispanic White Infants. Black infants were about 2.65 times more likely to die than white infants during the first year of life. High poverty and very rural counties also remained associated with higher infant mortality, independent of individual maternal sociodemographic, health and obstetric factors. The fetal mortality rate (number of fetal deaths per 1,000 live births and fetal deaths) in Missouri in 2021 (provisional) was 5.58, compared to 6.18 in 2020 and 5.54 in 2019. Missouri ranked 27th out of all 50 states and D.C. for fetal mortality.</p>	

NEW DECISION ITEM

Health and Senior Services	Budget Unit <u>58243C, 58025C</u>
Division of Community and Public Health	
State Fetal Infant Mortality Review (FIMR) Network DI# 1580025	HB Section <u>10.770, 10.605</u>

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The FIMR program will require 2.00 FTE, a FIMR Program Coordinator and 1.00 Maternal Child Health (MCH) Research/Data Analyst. There will be 10.00 Regional LPHA or Community Partner Contracts utilized to fulfill the needs of this program. Each regional contract would support local infrastructure to perform home and family interviews, conduct case reviews, and put FIMR recommendations into action at the local level.

The FIMR model utilizes a regional approach because of the large case load and often contributing factors for fetal and infant deaths are related to local environmental causes that local communities will understand better than the state program. To account for the Governor Reserve, the amounts requested have been adjusted accordingly.

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.

Budget Object Class/Job Class	Dept Req GR DOLLARS	Dept Req GR FTE	Dept Req FED DOLLARS	Dept Req FED FTE	Dept Req OTHER DOLLARS	Dept Req OTHER FTE	Dept Req TOTAL DOLLARS	Dept Req TOTAL FTE	Dept Req One-Time DOLLARS
Professional Services (400)	0		0		0		0		0
Total EE	0		0		0		0		0
Program Distributions (800)	0		0		0		0		0
Total PSD	0		0		0		0		0
Grand Total	0	0.00	0	0.00	0	0.00	0	0.00	0

NEW DECISION ITEM

Health and Senior Services			Budget Unit 58243C, 58025C						
Division of Community and Public Health									
State Fetal Infant Mortality Review (FIMR) Network			DI# 1580025		HB Section 10.770, 10.605				
	Gov Rec	Gov Rec	Gov Rec	Gov Rec	Gov Rec	Gov Rec	Gov Rec	Gov Rec	Gov Rec
	GR	GR	FED	FED	OTHER	OTHER	TOTAL	TOTAL	One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Professional Services (400)	183,926						183,926		0
Total EE	183,926		0		0		183,926		0
Program Distributions (800)	1,648,000		0		0		1,648,000		0
Total PSD	1,648,000		0		0		1,648,000		0
Grand Total	1,831,926	0.00	0	0.00	0	0.00	1,831,926	0.00	0
6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)									
6a. Provide an activity measure(s) for the program.									
Activity for this program will be measured by the number of individual cases reviewed utilizing medical records abstraction and home and family interviews.									
6b. Provide a measure(s) of the program's quality.									
The program's quality will be measured by feedback from LPHAs or nonprofits that are contracted to coordinate regional teams. The state program and regional teams will work closely to ensure case reviews, data submission, and data aggregation meet program standards.									
6c. Provide a measure(s) of the program's impact.									
The program's impact will be measured through successful identification and implementation of recommendations to reduce fetal and infant deaths at both the state and local levels.									
6d. Provide a measure(s) of the program's efficiency.									
Efficiency will be measured by evaluating each regional team's ability to conduct interviews and case reviews within a timely manner based on best practices.									

NEW DECISION ITEM

Health and Senior Services		Budget Unit	<u>58243C, 58025C</u>
Division of Community and Public Health			
State Fetal Infant Mortality Review (FIMR) Network	DI# 1580025	HB Section	<u>10.770, 10.605</u>
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:			
<ul style="list-style-type: none">• The proposed program is based on the National Fetal and Infant Mortality Review (NFIMR) program model, which is endorsed by the American College of Obstetricians and Gynecologists (ACOG), the March of Dimes Birth Defects Foundation, and the federal Maternal and Child Health Bureau at HRSA. It also has been identified by the National Conference of State Legislators as a data-driven, evidence-based policy to help reduce infant and maternal mortality rates. Adherence to this model will be essential to create a program that meets performance expectations.• The Department will set standards for case review procedures, data submission, and data aggregation to ensure data reliability. Contracts with LPHAs or nonprofits for coordination of regional teams will establish clear deliverables to guarantee quality.• Two non-governmental local FIMR teams currently exist in Missouri, one in the City of St. Louis and one in Kansas City. These organizations will continue to be allowed to operate independently of the state program, if desired, but will be expected to utilize standards and methods of review established by the Department, coordinate with the state FIMR Program and regional FIMR teams, and submit all outcomes, findings, and data for their areas of purview to the state program. Collaboration and cooperation with these two teams will be essential to implementing a successful program.• The Child Fatality Review Program (CFRP) in the Department of Social Services (DSS) reviews infant and child deaths (0-17) due to non-medical causes (such as intentional and unintentional injuries). Their programs, processes, and purposes are not the same, but collaboration with the CFRP will also be essential to ensure data reliability and make recommendations for addressing factors that cause fetal, infant, and child death.			

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
WOMENS HEALTH AND WELLNESS								
Fetal Infant Mortality Review - 1580025								
PROFESSIONAL SERVICES	0	0.00	0	0.00	0	0.00	183,926	0.00
TOTAL - EE	0	0.00	0	0.00	0	0.00	183,926	0.00
PROGRAM DISTRIBUTIONS	0	0.00	0	0.00	0	0.00	1,648,000	0.00
TOTAL - PD	0	0.00	0	0.00	0	0.00	1,648,000	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,831,926	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$1,831,926	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

NEW DECISION ITEM

Department Health and Senior Services					Budget Unit 58243C, 58025C				
Division of Community and Public Health									
SAFE-T Network DI# 1580026					HB Section 10.770, 10.605				
1. AMOUNT OF REQUEST									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	45,000	0	45,000
EE	0	0	0	0	EE	0	570,341	0	570,341
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	0	0	0	Total	0	615,341	0	615,341
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	16,772	0	16,772
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				
Federal Fund: Department of Health and Senior Services - Federal (0143).									
2. THIS REQUEST CAN BE CATEGORIZED AS:									
<input type="checkbox"/> New Legislation		<input checked="" type="checkbox"/> New Program		<input type="checkbox"/> Fund Switch					
<input type="checkbox"/> Federal Mandate		<input type="checkbox"/> Program Expansion		<input type="checkbox"/> Cost to Continue					
<input type="checkbox"/> GR Pick-Up		<input type="checkbox"/> Space Request		<input type="checkbox"/> Equipment Replacement					
<input type="checkbox"/> Pay Plan		<input type="checkbox"/> Other: _____							

NEW DECISION ITEM

Department Health and Senior Services Division of Community and Public Health SAFE-T Network	Budget Unit 58243C, 58025C HB Section 10.770, 10.605
DI# 1580026	

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

The Office on Women's Health (OWH) has identified a federal funding opportunity to expand training for sexual assault nurse examiners (SANEs). A part of the responsibilities of the OWH, according to 192.2520 RSMo, is to provide mentoring and educational opportunities and to apply for available grants to develop and maintain the network and the training offered by the network. The Justice for Survivors Act requires the Department of Health and Senior Services (DHSS) to establish a statewide telehealth network for forensic examinations of victims of sexual offenses. The OWH is currently building and piloting the program and will launch the Sexual Assault Forensic Exams via Telehealth (SAFE-T) Network statewide in 2024. This will translate into increased sustainability and improved workforce development for the project. The OWH currently does not have any federal appropriation authority to use for this specific grant, or any other grant to support the work. Federal appropriation authority is needed to meet the statutory requirement of applying for grant opportunities.

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

This is an ongoing request for spending authority. The Office on Women's Health is not requesting any FTE with this request, as most of the funds will support contracts for training nurses across the state. Funds will also support travel costs for nurses to attend training, training supplies, and equipment. We request personnel to support the current FTE effort on this project for grant administration.

NEW DECISION ITEM

Department Health and Senior Services			Budget Unit 58243C, 58025C						
Division of Community and Public Health									
SAFE-T Network		DI# 1580026	HB Section 10.770, 10.605						
5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.									
Budget Object Class/Job Class	Dept Req GR DOLLARS	Dept Req GR FTE	Dept Req FED DOLLARS	Dept Req FED FTE	Dept Req OTHER DOLLARS	Dept Req OTHER FTE	Dept Req TOTAL DOLLARS	Dept Req TOTAL FTE	Dept Req One-Time DOLLARS
Public Health Program Manager (19PH50)	0	0.00	0	0.00	0	0.00	0	0.00	0
Registered Nurse (05NU30)	0	0.00	0	0.00	0	0.00	0	0.00	0
Total PS	0	0.00	0	0.00	0	0.00	0	0.00	0
Travel, In-State (140)	0		0		0		0		0
Supplies (190)	0		0		0		0		0
Communication Services (340)	0		0		0		0		0
Professional Services (400)	0		0		0		0		0
M&R Services (430)	0		0		0		0		0
Total EE	0		0		0		0		0
Grand Total	0	0.00	0	0.00	0	0.00	0	0.00	0
Budget Object Class/Job Class	Gov Rec GR DOLLARS	Gov Rec GR FTE	Gov Rec FED DOLLARS	Gov Rec FED FTE	Gov Rec OTHER DOLLARS	Gov Rec OTHER FTE	Gov Rec TOTAL DOLLARS	Gov Rec TOTAL FTE	Gov Rec One-Time DOLLARS
Public Health Program Manager (19PH50)	0	0.00	15,000	0.00	0	0.00	15,000	0.00	0
Registered Nurse (05NU30)	0	0.00	30,000	0.00	0	0.00	30,000	0.00	0
Total PS	0	0.00	45,000	0.00	0	0.00	45,000	0.00	0
Travel, In-State (140)	0		26,151		0		26,151		0
Supplies (190)	0		33,267		0		33,267		0
Communication Services (340)	0		5,415		0		5,415		0
Professional Services (400)	0		504,311		0		504,311		0
M&R Services (430)	0		1,197		0		1,197		0
Total EE	0		570,341		0		570,341		0
Grand Total	0	0.00	615,341	0.00	0	0.00	615,341	0.00	0

NEW DECISION ITEM

Department Health and Senior Services Division of Community and Public Health SAFE-T Network	Budget Unit 58243C, 58025C HB Section 10.770, 10.605
DI# 1580026	

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

6a. Provide and activity measure(s) for the program.
 Number of nurses trained. With current funding, OWH anticipates training 20 nurses as SANEs each year. With proposed additional funding, OWH anticipates training 100 nurses as SANEs each year.

6b. Provide a measure(s) of the program's quality.
 Number of nurses reporting satisfactory or above in regards to training quality. With current funding, OWH anticipates 80% of nurses rating the training satisfactory or above. With proposed additional funding, OWH anticipates 90 percent report satisfactory or above.

6c. Provide a measure(s) of the program's impact.
 Number of nurses with an improved understanding and competency of how to provide forensic care to survivors of sexual assault. With current funding, OWH anticipates that 80 percent of nurses trained will demonstrate improved understanding and competency. With proposed additional funding, OWH anticipates 90 percent demonstrate improved understanding and competency.

6d. Provide a measure(s) of the program's efficiency.
 The number of hospitals providing in-person SANE services. With current funding, OWH anticipates 20 percent of hospitals providing 24/7 SANE coverage and an additional 10 percent providing part-time in-person coverage. With proposed additional funding, OWH anticipates 25 percent of hospitals providing 24/7 SANE coverage and an additional 15 percent providing part-time in-person coverage.

7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:

The OWH will work with vendors to provide regional training to nurses interested in becoming SANEs, develop improved training curriculums in order to improve impact and quality, and provide onsite support to hospitals to increase the number of hospitals providing in-person SANE care.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
WOMENS HEALTH AND WELLNESS								
SAFE-T Grant - 1580026								
REGISTERED NURSE	0	0.00	0	0.00	0	0.00	30,000	0.00
PUBLIC HEALTH PROGRAM MANAGER	0	0.00	0	0.00	0	0.00	15,000	0.00
TOTAL - PS	0	0.00	0	0.00	0	0.00	45,000	0.00
TRAVEL, IN-STATE	0	0.00	0	0.00	0	0.00	25,000	0.00
SUPPLIES	0	0.00	0	0.00	0	0.00	30,000	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	0	0.00	500,000	0.00
TOTAL - EE	0	0.00	0	0.00	0	0.00	555,000	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$600,000	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$600,000	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
DIVISION OF ADMINISTRATION								
SAFE-T Grant - 1580026								
TRAVEL, IN-STATE	0	0.00	0	0.00	0	0.00	1,151	0.00
SUPPLIES	0	0.00	0	0.00	0	0.00	3,267	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	0	0.00	5,415	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	0	0.00	4,311	0.00
M&R SERVICES	0	0.00	0	0.00	0	0.00	1,197	0.00
TOTAL - EE	0	0.00	0	0.00	0	0.00	15,341	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$15,341	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$15,341	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

NEW DECISION ITEM

Department of Health and Senior Services					Budget Unit 58243C, 58025C				
Division of Community and Public Health					HB Section 10.770, 10.605				
Comprehensive Care of Pregnant & Postpartum Peop DI# 1580031									
1. AMOUNT OF REQUEST									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	136,139	136,139
EE	0	0	0	0	EE	0	0	4,218,437	4,218,437
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	0	0	0	Total	0	0	4,354,576	4,354,576
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	2.50	2.50
Est. Fringe	0	0	0	0	Est. Fringe	0	0	88,287	88,287
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				
Other Funds: Opioid Treatment and Recovery (0705).									
2. THIS REQUEST CAN BE CATEGORIZED AS:									
<input type="checkbox"/> New Legislation	<input checked="" type="checkbox"/> X		<input type="checkbox"/> New Program			<input type="checkbox"/> Fund Switch			
<input type="checkbox"/> Federal Mandate	<input type="checkbox"/>		<input type="checkbox"/> Program Expansion			<input type="checkbox"/> Cost to Continue			
<input type="checkbox"/> GR Pick-Up	<input type="checkbox"/>		<input type="checkbox"/> Space Request			<input type="checkbox"/> Equipment Replacement			
<input type="checkbox"/> Pay Plan	<input type="checkbox"/>		<input type="checkbox"/> Other: _____						

NEW DECISION ITEM

Department of Health and Senior Services Division of Community and Public Health Comprehensive Care of Pregnant & Postpartum Peop DI# 1580031	Budget Unit <u>58243C, 58025C</u> HB Section <u>10.770, 10.605</u>
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3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

The Department of Health and Senior Services (DHSS) requests funding to address current gaps in advancing maternal and perinatal health. There are three program areas that DHSS requests funding to address:

- 1) Expansion of a program similar to the WISH (Women and Infant Substance Help) Center currently located in St. Louis to expand into the Kansas City and Springfield regions. The WISH Center provides comprehensive, high-risk maternity care for women who are affected by opioid dependency. The goal of the program is to start expectant mothers on MAT (Medication Assisted Treatment) therapy as early as possible to minimize pregnancy complications and reduce the length of hospital stay for newborns. At the WISH Center, women receive care from various specialists, all in one place. In addition to obstetrician physicians who specialize in addiction medicine, women receive care from social workers, mental health providers, Community Health Workers, and so forth. After delivery, care is continued when the risk of relapse is most significant. This includes partnering with organizations for job training skills, housing assistance, and life and parenting skills to help moms maintain sobriety.
- 2) The "Care for Pregnant and Postpartum Women with Substance Use Disorder (CPPPSUD)" and Neonatal Abstinence Syndrome (NAS) Collaborative to expand into rural Missouri facilities and provide additional implementation support.
- 3) A program to provide Harm Reduction Kits to obstetrician providers to distribute to pregnant and postpartum women at risk to prevent overdose and infectious disease transmission. The kits will consist of overdose reversal supplies, including Naloxone; substance test kits, including fentanyl test strips; safer sex kits, including condoms; wound care supplies; FDA-approved home testing kits for viral hepatitis and HIV; educational materials including substance use treatment programs for pregnant women and "Never Use Alone" hotline.

Missouri is 32nd in the nation for infant mortality and has a maternal mortality ratio of 32.6 per 100,000 live births, which is the 42nd worst in the country. Additionally, the Pregnancy-Associated Mortality Review (PAMR) board reveals mental health conditions, including substance use, as a leading cause of pregnancy-related death in Missouri.

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The requested funding to expand treatment for pregnant and postpartum women with substance use disorders in the Kansas City and Springfield region is based upon existing budget examples of the WISH Clinic, which includes critical staffing (peer support specialists, maternal-fetal medicine, nursing, psychologist, etc.) and essential clinical supplies. Of the requested funding, \$500,000 would be to support rural facilities to implement the CPPPSUD and NAS collaborative is based upon current program expenditures. This funding will be implemented through contracts. Purchase of Harm Reduction Kits and kit supplies, in the amount of \$200,000, estimated at \$50 per kit or serve approximately 4,000 women.

In addition, 2.00 FTE are requested to facilitate these programs. A Public Health Program Specialist will be responsible for contract development, monitoring, reporting and technical assistance, and an Administrative Support Professional to provide support to the program operations. The work of distribution to obstetrician providers will be absorbed by existing staff.

NEW DECISION ITEM

Department of Health and Senior Services			Budget Unit 58243C, 58025C						
Division of Community and Public Health									
Comprehensive Care of Pregnant & Postpartum Peop DI# 1580031			HB Section 10.770, 10.605						
5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.									
	Dept Req GR	Dept Req GR	Dept Req FED	Dept Req FED	Dept Req OTHER	Dept Req OTHER	Dept Req TOTAL	Dept Req TOTAL	Dept Req One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Public Health Program Spec (19PH20)	0	0.00	0	0.00	0	0.00	0	0.00	0
Administrative Support Prof (02AM30)	0	0.00	0	0.00	0	0.00	0	0.00	0
Total PS	0	0.00	0	0.00	0	0.00	0	0.00	0
Travel, In-State (140)	0		0		0		0		
Supplies (190)	0		0		0		0		
Communication Serv & Supp (340)	0		0		0		0		
Professional Services (400)	0		0		0		0		
Total EE	0		0		0		0		0
Grand Total	0	0.00	0	0.00	0	0.00	0	0.00	0
	Gov Rec GR	Gov Rec GR	Gov Rec FED	Gov Rec FED	Gov Rec OTHER	Gov Rec OTHER	Gov Rec TOTAL	Gov Rec TOTAL	Gov Rec One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Public Health Program Spec (19PH20)	0	0.00	0	0.00	56,650	1.00	56,650	1.00	0
Procurement Specialist (11PM30)	0	0.00	0	0.00	30,989	0.50	30,989	0.50	0
Administrative Support Prof (02AM30)	0	0.00	0	0.00	48,500	1.00	48,500	1.00	0
Total PS	0	0.00	0	0.00	136,139	2.50	136,139	2.50	0
Travel In-State (140)	0		0		5,862		5,862		0
Supplies (190)	0		0		208,297		208,297		0
Communication Serv & Supp (340)	0		0		2,914		2,914		0
Professional Services (400)	0		0		4,001,364		4,001,364		0
Total EE	0		0		4,218,437		4,218,437		0
Grand Total	0	0.00	0	0.00	4,354,576	2.50	4,354,576	2.50	0

NEW DECISION ITEM

Department of Health and Senior Services Division of Community and Public Health Comprehensive Care of Pregnant & Postpartum Peop DI# 1580031	Budget Unit <u>58243C, 58025C</u> HB Section <u>10.770, 10.605</u>
6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)	
6a. Provide an activity measure(s) for the program. The office on Women's Health will track the following as a measure of program activity: <ul style="list-style-type: none"> • The number of pregnant and postpartum women enrolled in a treatment program. • The number of rural providers/facilities actively participating in the CPPPSUD and NAS collaborative, with the target of 100 percent participation by the end of this funding. • The number of Harm Reduction Kits distributed to OB's across the state. 	
6b. Provide a measure(s) of the program's quality. The office on Women's Health will track the following as a measure of program quality: <ul style="list-style-type: none"> • Number of "WISH" facilities accredited by the National Committee for Quality Assurance (NCQA) for the Patient-Centered Medical Home. • At least 80 percent of quality metrics in the CPPPSUD collaborative that rural facilities have completed. • The percent increase in births to rural residents covered by the CPPPSUD & NAS collaborative. • The percent of obstetrician providers reporting satisfaction with harm reduction kits. 	
6c. Provide a measure(s) of the program's impact. The office on Women's Health will track the following as a measure of program impact: <ul style="list-style-type: none"> • The percent increase in number of pregnant women connected to addiction treatment services and MAT. • The percent reduction in the number of overdoses to pregnant and postpartum women. • The percent increase in rural providers and facilities actively participating in the CPPPSUD & NAS collaborative. • The percent increase in the number of rural facilities implementing the Eat, Sleep & Console model of care. • The percent reduction in neonates administered morphine for severe withdrawal symptoms. • The percent reduction in transfer of neonates from rural facilities to urban facilities. • The percent in survey responses completed by OB providers detailing utilization of the kits and provider impressions. • The percent decrease in the Pregnancy-related mortality ratio. 	
6d. Provide a measure(s) of the program's efficiency. The office on Women's Health will track the following as a measure of program efficiency: <ul style="list-style-type: none"> • Timeliness of contracted funds distributed. • Number of harm reduction kits distributed. • Number of days between kit order and distribution. • Percent of survey responses indicating program satisfaction. 	

NEW DECISION ITEM

Department of Health and Senior Services	Budget Unit <u>58243C, 58025C</u>
Division of Community and Public Health	
Comprehensive Care of Pregnant & Postpartum Peop DI# 1580031	HB Section <u>10.770, 10.605</u>
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:	
The contracts will utilize targeted coaching calls to support implementation, promote progress through CPPPSUD and NAS components, and provide direct technical support. Webinars will connect teams and subject matter experts to support ongoing engagement, training and networking. DHSS will utilize existing partnerships to connect with obstetrician clinicians to support distribution of harm reduction kits. Partnering with the WISH Clinic to support expansion of best-practices in the Kansas City and Springfield regions will also help to achieve the performance measure targets.	

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
WOMENS HEALTH AND WELLNESS								
Comprehensive Care - 1580031								
LEAD ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	0	0.00	48,500	1.00
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	0	0.00	56,650	1.00
TOTAL - PS	0	0.00	0	0.00	0	0.00	105,150	2.00
TRAVEL, IN-STATE	0	0.00	0	0.00	0	0.00	5,119	0.00
SUPPLIES	0	0.00	0	0.00	0	0.00	207,263	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	0	0.00	1,200	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	0	0.00	4,000,000	0.00
TOTAL - EE	0	0.00	0	0.00	0	0.00	4,213,582	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$4,318,732	2.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$4,318,732	2.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
DIVISION OF ADMINISTRATION								
Comprehensive Care - 1580031								
PROCUREMENT SPECIALIST	0	0.00	0	0.00	0	0.00	30,989	0.50
TOTAL - PS	0	0.00	0	0.00	0	0.00	30,989	0.50
TRAVEL, IN-STATE	0	0.00	0	0.00	0	0.00	743	0.00
SUPPLIES	0	0.00	0	0.00	0	0.00	1,034	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	0	0.00	1,714	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	0	0.00	1,364	0.00
TOTAL - EE	0	0.00	0	0.00	0	0.00	4,855	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$35,844	0.50
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$35,844	0.50

CORE DECISION ITEM

Health and Senior Services					Budget Unit 58032C				
Community and Public Health									
Core - Vital Records Registration and Issuance					HB Section 10.775				
1. CORE FINANCIAL SUMMARY									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	1,609,456	142,709	238,208	1,990,373	PS	1,609,456	142,709	238,208	1,990,373
EE	70,900	723,588	64,843	859,331	EE	70,900	723,588	64,843	859,331
PSD	0	64,166	355,482	419,648	PSD	0	64,166	355,482	419,648
TRF	0	0	0	0	TRF	0	0	0	0
Total	1,680,356	930,463	658,533	3,269,352	Total	1,680,356	930,463	658,533	3,269,352
FTE	21.19	2.49	4.72	28.40	FTE	21.19	2.49	4.72	28.40
Est. Fringe	918,097	90,585	159,670	1,168,352	Est. Fringe	918,097	90,585	159,670	1,168,352
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.				
Federal Funds: Department of Health and Senior Services Federal (0143).									
Other Funds: Health Initiatives (0275), Missouri Public Health Services (0298), Putative Father Registry (0780), and Missouri Coroner's Training Fund (0846).									
2. CORE DESCRIPTION									
The Department is the repository of vital records for the State of Missouri and provides citizens and federal, state, and local agencies the ability to register, amend, and obtain vital records. Vital record documents also provide important data and statistical information critical to identifying and quantifying health related issues and measuring progress toward quality improvement and public health goals.									
Activities include:									
• Maintaining the central registry of births, deaths, reports of fetal deaths, reports of marriages and divorces, and the Putative Father Registry.									
• Correcting or amending vital records as authorized by state law, to include court orders or as a result of adoption or legitimation.									
• Issuing certified and non-certified copies of births, deaths, reports of fetal deaths, original pre-adoptive records, and statements relating to marriages and divorces.									
• Conducting workshops, trainings, and providing technical assistance to ensure the complete, accurate, and timely registration of vital records by a wide variety of professionals who are responsible for components of vital record documentation and submission.									
The Department is a part of the national group of jurisdictions that share vital records information with the National Vital Statistics System (NVSS) at the Centers for Disease Control and Prevention (CDC). The compiled national natality, mortality, and fetal death statistics inform a variety of medical and health-related research efforts. Local and state public health agencies use information from the death record to assess community health status and for disease surveillance (e.g. drug overdose deaths, influenza, and other infectious diseases).									

CORE DECISION ITEM

Health and Senior Services					Budget Unit	58032C
Community and Public Health						
Core - Vital Records Registration and Issuance					HB Section	10.775
3. PROGRAM LISTING (list programs included in this core funding)						
Vital Records Registration and Issuance.						
4. FINANCIAL HISTORY						
	FY 2021	FY 2022	FY 2023	FY 2024		
	Actual	Actual	Actual	Current Yr.		
Appropriation (All Funds)	0	0	2,625,166	3,269,353		
Less Reverted (All Funds)	0	0	(35,349)	0		
Less Restricted (All Funds)	0	0	0	0		
Budget Authority (All Funds)	0	0	2,589,817	3,269,353		
Actual Expenditures (All Funds)	0	0	1,635,868	N/A		
Unexpended (All Funds)	0	0	953,949	N/A		
Unexpended, by Fund:						
General Revenue	0	0	684	N/A		
Federal	0	0	542,336	N/A		
Other	0	0	410,929	N/A		

Actual Expenditures (All Funds)

Fiscal Year	Expenditure Amount
FY 2021	0
FY 2022	0
FY 2023	1,635,868

Reverted includes the statutory three percent reserve amount (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES VITAL RECORD CERT AND ISSUANCE

5. CORE RECONCILIATION DETAIL

			Budget Class	FTE	GR	Federal	Other	Total	Explanation
TAFP AFTER VETOES									
			PD	0.00	0	0	355,482	355,482	
			Total	0.00	0	0	355,482	355,482	
DEPARTMENT CORE ADJUSTMENTS									
Core Reallocation	1215 5185	PS		2.49	0	142,709	0	142,709	CORE reallocations for programmatic alignment.
Core Reallocation	1215 5184	PS		21.19	1,609,456	0	0	1,609,456	CORE reallocations for programmatic alignment.
Core Reallocation	1215 5791	PS		3.00	0	0	107,515	107,515	CORE reallocations for programmatic alignment.
Core Reallocation	1215 5188	PS		1.72	0	0	130,693	130,693	CORE reallocations for programmatic alignment.
Core Reallocation	1215 5789	EE		0.00	70,900	0	0	70,900	CORE reallocations for programmatic alignment.
Core Reallocation	1215 5187	EE		0.00	0	723,588	0	723,588	CORE reallocations for programmatic alignment.
Core Reallocation	1215 5811	EE		0.00	0	0	11,371	11,371	CORE reallocations for programmatic alignment.
Core Reallocation	1215 5792	EE		0.00	0	0	27,748	27,748	CORE reallocations for programmatic alignment.
Core Reallocation	1215 5189	EE		0.00	0	0	25,724	25,724	CORE reallocations for programmatic alignment.
Core Reallocation	1215 5187	PD		0.00	0	64,166	0	64,166	CORE reallocations for programmatic alignment.
NET DEPARTMENT CHANGES				28.40	1,680,356	930,463	303,051	2,913,870	

CORE RECONCILIATION DETAIL

**DEPARTMENT OF HEALTH & SENIOR SERVICES
VITAL RECORD CERT AND ISSUANCE**

5. CORE RECONCILIATION DETAIL

	Budget Class	FTE	GR	Federal	Other	Total	Explanation
<hr/>							
DEPARTMENT CORE REQUEST							
	PS	28.40	1,609,456	142,709	238,208	1,990,373	
	EE	0.00	70,900	723,588	64,843	859,331	
	PD	0.00	0	64,166	355,482	419,648	
	Total	28.40	1,680,356	930,463	658,533	3,269,352	
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GOVERNOR'S RECOMMENDED CORE							
	PS	28.40	1,609,456	142,709	238,208	1,990,373	
	EE	0.00	70,900	723,588	64,843	859,331	
	PD	0.00	0	64,166	355,482	419,648	
	Total	28.40	1,680,356	930,463	658,533	3,269,352	
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DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
VITAL RECORD CERT AND ISSUANCE									
CORE									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	1,609,456	21.19	1,609,456	21.19	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	142,709	2.49	142,709	2.49	
MO PUBLIC HEALTH SERVICES	0	0.00	0	0.00	130,693	1.72	130,693	1.72	
PUTATIVE FATHER REGISTRY	0	0.00	0	0.00	107,515	3.00	107,515	3.00	
TOTAL - PS	0	0.00	0	0.00	1,990,373	28.40	1,990,373	28.40	
EXPENSE & EQUIPMENT									
GENERAL REVENUE	0	0.00	0	0.00	70,900	0.00	70,900	0.00	
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	723,588	0.00	723,588	0.00	
HEALTH INITIATIVES	0	0.00	0	0.00	11,371	0.00	11,371	0.00	
MO PUBLIC HEALTH SERVICES	0	0.00	0	0.00	25,724	0.00	25,724	0.00	
PUTATIVE FATHER REGISTRY	0	0.00	0	0.00	27,748	0.00	27,748	0.00	
TOTAL - EE	0	0.00	0	0.00	859,331	0.00	859,331	0.00	
PROGRAM-SPECIFIC									
DHSS-FEDERAL AND OTHER FUNDS	0	0.00	0	0.00	64,166	0.00	64,166	0.00	
MO CORONERS TRAINING FUND	0	0.00	355,482	0.00	355,482	0.00	355,482	0.00	
TOTAL - PD	0	0.00	355,482	0.00	419,648	0.00	419,648	0.00	
TOTAL	0	0.00	355,482	0.00	3,269,352	28.40	3,269,352	28.40	
Pay Plan - 0000012									
PERSONAL SERVICES									
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	60,250	0.00	
PUTATIVE FATHER REGISTRY	0	0.00	0	0.00	0	0.00	3,441	0.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	63,691	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	63,691	0.00	

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DECISION ITEM SUMMARY

Budget Unit								
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
VITAL RECORD CERT AND ISSUANCE								
Vital Records- Expanded Operat - 1580009								
EXPENSE & EQUIPMENT								
GENERAL REVENUE	0	0.00	0	0.00	271,999	0.00	0	0.00
TOTAL - EE	0	0.00	0	0.00	271,999	0.00	0	0.00
TOTAL	0	0.00	0	0.00	271,999	0.00	0	0.00
GRAND TOTAL	\$0	0.00	\$355,482	0.00	\$3,541,351	28.40	\$3,333,043	28.40

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58032C BUDGET UNIT NAME: Vital Records Registration and Issuance HOUSE BILL SECTION: 10.775	DEPARTMENT: Department of Health and Senior Services (DHSS) DIVISION: Division of Community and Public Health (DCPH)
1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.	
DEPARTMENT REQUEST	
<p>DHSS has worked to create and breakdown CORES within DCPH in order to align the budget structure with the division's operations. The Department requests fifty percent (50%) flexibility between House Bills 10.700, 10.705, 10.710, 10.715, 10.720, 10.725, 10.730, 10.735, 10.740, 10.745, 10.750, 10.755, 10.760, 10.765, 10.770, and 10.775 in order to ensure continuity of operations during the transition.</p> <p>Flexibility previously granted by the Legislature in FY 2024 under House Bill 10.775 between American Rescue Plan Act 2021 grant programs are reallocated in House Bill section 10.780 in FY 2025 Budget Request.</p>	
2. Estimate how much flexibility will be used for the budget year. How much flexibility was used in the Prior Year Budget and the Current Year Budget? Please specify the amount.	
PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT YEAR ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
\$0	House Bills 10.775 and 10.780 language allows up to ten percent (10%) flexibility between American Rescue Plan Act of 2021 grants within each section.
Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of Governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The Department's requested flex will allow the Department to utilize available resources in the most effective manner as the need arises. Flexibility (50%) between House bill sections will allow for continuity of operations as DCPH continues to align budget structure with its operating structure. The Department cannot predict how much flexibility will be utilized.	
3. Please explain how flexibility was used in the prior and/or current years.	
PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
Not applicable.	Not applicable.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
VITAL RECORD CERT AND ISSUANCE								
CORE								
TYPIST	0	0.00	0	0.00	105,984	1.60	105,984	1.60
SPECIAL ASST PROFESSIONAL	0	0.00	0	0.00	100,463	0.68	100,463	0.68
ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	952,163	15.32	952,163	15.32
LEAD ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	46,968	0.76	46,968	0.76
ADMIN SUPPORT PROFESSIONAL	0	0.00	0	0.00	290,444	3.63	290,444	3.63
ASSOC RESEARCH/DATA ANALYST	0	0.00	0	0.00	50,645	0.68	50,645	0.68
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	266,341	3.79	266,341	3.79
SR PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	102,291	1.26	102,291	1.26
PUBLIC HEALTH PROGRAM SPV	0	0.00	0	0.00	75,074	0.68	75,074	0.68
TOTAL - PS	0	0.00	0	0.00	1,990,373	28.40	1,990,373	28.40
TRAVEL, IN-STATE	0	0.00	0	0.00	89,851	0.00	89,851	0.00
TRAVEL, OUT-OF-STATE	0	0.00	0	0.00	49,919	0.00	49,919	0.00
SUPPLIES	0	0.00	0	0.00	293,102	0.00	293,102	0.00
PROFESSIONAL DEVELOPMENT	0	0.00	0	0.00	60,905	0.00	60,905	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	20,927	0.00	20,927	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	248,712	0.00	248,712	0.00
M&R SERVICES	0	0.00	0	0.00	69,645	0.00	69,645	0.00
MOTORIZED EQUIPMENT	0	0.00	0	0.00	541	0.00	541	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	873	0.00	873	0.00
OTHER EQUIPMENT	0	0.00	0	0.00	10,939	0.00	10,939	0.00
BUILDING LEASE PAYMENTS	0	0.00	0	0.00	3,197	0.00	3,197	0.00
MISCELLANEOUS EXPENSES	0	0.00	0	0.00	10,720	0.00	10,720	0.00
TOTAL - EE	0	0.00	0	0.00	859,331	0.00	859,331	0.00
PROGRAM DISTRIBUTIONS	0	0.00	355,482	0.00	419,648	0.00	419,648	0.00
TOTAL - PD	0	0.00	355,482	0.00	419,648	0.00	419,648	0.00
GRAND TOTAL	\$0	0.00	\$355,482	0.00	\$3,269,352	28.40	\$3,269,352	28.40
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$1,680,356	21.19	\$1,680,356	21.19
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$930,463	2.49	\$930,463	2.49
OTHER FUNDS	\$0	0.00	\$355,482	0.00	\$658,533	4.72	\$658,533	4.72

PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.775</u>		
Vital Records Registration and Issuance			
Program is found in the following core budget(s): <u>Vital Records Registration and Issuance</u>			
<p>1a. What strategic priority does this program address? Invest in Innovation to Modernize Infrastructure, Build and Strengthen Partnerships, and Expand Access to Services</p> <p>1b. What does this program do? The Department is the repository of vital records for the State of Missouri and provides citizens and federal, state, and local agencies the ability to register, amend, and obtain vital records and important data and statistical information critical to identifying and quantifying health related issues and measuring progress toward quality improvement and public health goals. Activities include:</p> <ul style="list-style-type: none"> • Maintaining the central registry of births, deaths, reports of fetal deaths, reports of marriages and divorces, and the Putative Father Registry, in which is currently being completely replaced with one, comprehensive system. The new system, once implemented, will have an estimated return on investment (ROI) of more than \$5 million dollars. • Correcting or amending vital records, as authorized by state law, to include court orders or as a result of adoption or legitimation. • Issuing certified and non-certified copies of births, deaths, reports of fetal deaths, original pre-adoptive records, and statements relating to marriages and divorces. • Conducting workshops and trainings, as well as querying of records and providing technical assistance to ensure the complete, accurate, and timely registration of vital records. The Department is a part of the national group of jurisdictions that share vital records information with the National Vital Statistics System (NVSS) at the Centers for Disease Control and Prevention (CDC). The compiled national natality, mortality, and fetal death statistics inform a variety of medical and health-related research efforts. Local and state public health agencies use information from the death record to assess community health status and for disease surveillance (e.g. drug overdose deaths, influenza, and other infectious diseases). 			
Life Events Requiring a Vital Record			
Birth Certificate	Death Certificate	Marriage/Divorce Record	Fetal Death Certificate
Identification	Receive Insurance Benefits	Driver's License Documentation	Tax Purposes
School Registration	Death Investigation	Tax Purposes	Research Purposes
Driver's License Documentation	State Agency Program Removal	Receipt of Insurance Benefits	
Voter ID	Cease Benefits	Proof of Marriage	Paternity Documents
Passport	Research Purposes	Proof of Divorce	Proof of Paternity
Genealogical Purposes	Release from Legal Obligations	Proof of Single Status	Research Purposes
Research Purposes	(leases, titles, etc.)	Research Purposes	
Starting New Family/Adoption			

PROGRAM DESCRIPTION

Health and Senior Services

HB Section(s): 10.775

Vital Records Registration and Issuance

Program is found in the following core budget(s): Vital Records Registration and Issuance

2a. Provide an activity measure(s) for the program.

Records Issued and Registered										
Year	Birth		Death		Fetal Death & Still Birth		Marriage		Divorce	
	Issued	Registered	Issued	Registered	Issued	Registered	Issued	Registered	Issued	Registered
CY 2021	54,020	74,776	10,745	80,468	48	479	3,385	32,606	732	20,759
CY 2022	57,561	72,953	8,525	76,687	75	480	3,185	26,142	768	16,126
CY 2023	45,085	71,984	7,300	71,925	34	429	2,837	37,681	942	15,822
CY 2024 Proj.	56,675	73,408	9,080	77,632	69	480	3,235	27,758	763	17,284
CY 2025 Proj.	56,232	73,636	9,357	78,104	66	480	3,260	28,566	761	17,863
CY 2026 Proj.	56,453	73,522	9,218	77,868	68	480	3,247	28,162	762	17,573

Records are issued when they are provided to an individual upon request. Records are registered when they are officially filed with the state.

Amendments to Previously Registered Vital Records

Year	Adoptions	Legitimations	Birth	Death
CY 2021	3,317	0	13,125	2,416
CY 2022	3,520	49	21,407	1,965
CY 2023 Proj.	3,418	25	17,266	2,191
CY 2024 Proj.	3,469	37	19,337	2,078
CY 2025 Proj.	3,443	31	18,302	2,135
CY 2026 Proj.	3,456	34	18,819	2,107

Served by the state vital records office. This does not reflect local registrar activities.

Vital Records Clients Served

Year	Mail	Phone	VitalChek	In Person
CY 2021	66,438	102,357	29,484	3,209
CY 2022	58,187	107,919	33,128	2,373
CY 2023 Proj.	62,313	105,138	31,306	2,791
CY 2024 Proj.	60,250	106,529	32,217	2,582
CY 2025 Proj.	61,282	105,833	31,762	2,687
CY 2026 Proj.	60,766	106,181	31,990	2,635

VitalChek is a third party service offered for ordering expedited certificates online with a credit card.

PROGRAM DESCRIPTION

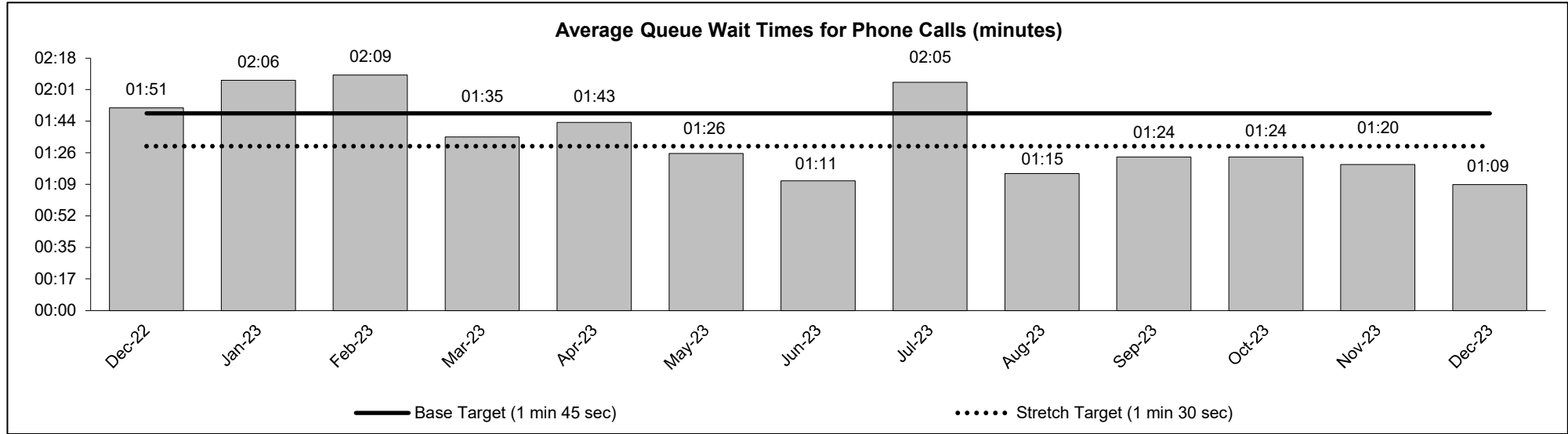
Health and Senior Services

HB Section(s): 10.775

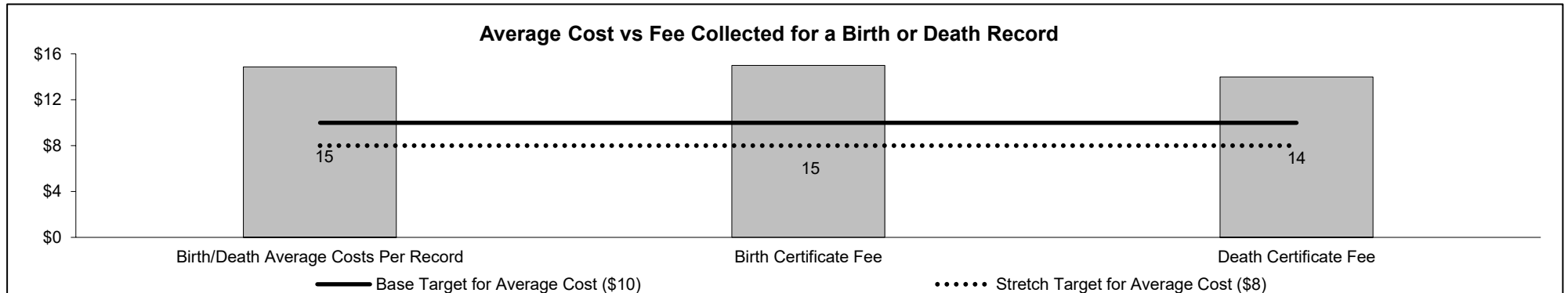
Vital Records Registration and Issuance

Program is found in the following core budget(s): Vital Records Registration and Issuance

2b. Provide a measure(s) of the program's quality.



2c. Provide a measure(s) of the program's impact.



Fund breakout for a birth certificate fee is as follows: General Revenue \$4.00, Children's Trust \$5.00, Endowed Care Cemetery \$1.00, and Missouri Public Health Services \$5.00. Fund breakout for a death certificate fee is as follows: General Revenue \$4.00, Children's Trust \$5.00, Endowed Care Cemetery \$1.00, Coroner's Training Fund \$1.00, and Missouri Public Health Services \$3.00.

PROGRAM DESCRIPTION

Health and Senior Services

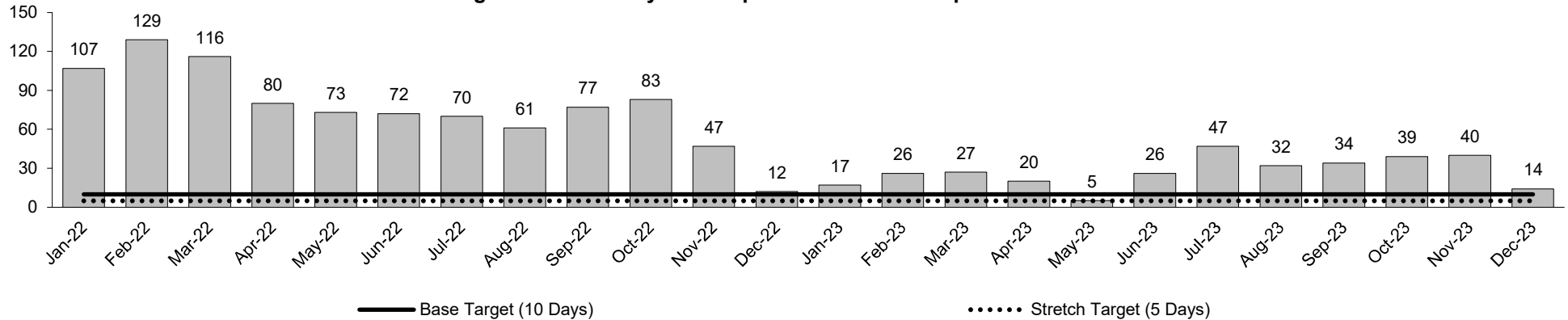
HB Section(s): 10.775

Vital Records Registration and Issuance

Program is found in the following core budget(s): Vital Records Registration and Issuance

2d. Provide a measure(s) of the program's efficiency.

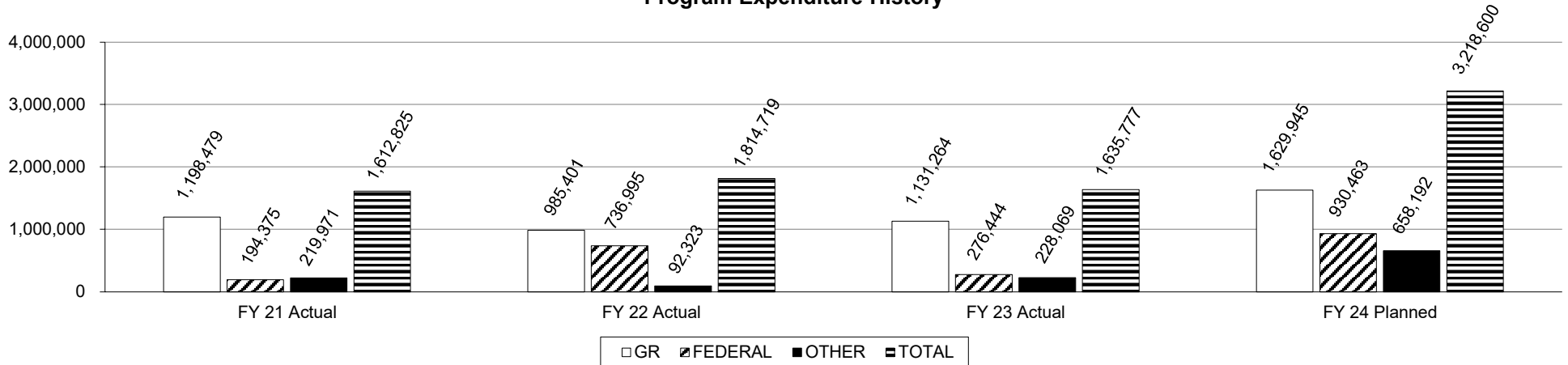
Average Number of Days to Respond to a Mailed Request for a Vital Record



This graph represents the time from when a request for a vital record is received via mail to when it is mailed out to the applicant.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)

Program Expenditure History



PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): <u>10.775</u>
Vital Records Registration and Issuance	
Program is found in the following core budget(s): Vital Records Registration and Issuance	
4. What are the sources of the "Other " funds? Health Initiatives (0275); Missouri Public Health Services (0298); and Putative Father Registry (0780), and Missouri Coroners Training Fund (0846).	
5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.) State: Sections 58.451, 58.455, 58.720, 188.047-055, 192.016, 192.025, 192.060, 192.067, 192.068, 192.323, 193.005-325, 453.100, and 453.170, RSMo. Federal: 42 USC Section 652(a)(7).	
6. Are there federal matching requirements? If yes, please explain. No.	
7. Is this a federally mandated program? If yes, please explain. No.	

NEW DECISION ITEM

Health and Senior Services					Budget Unit 58032C				
Division of Community and Public Health									
Vital Records - Expanded Operational Costs DI# 1580009					HB Section 10.775				
1. AMOUNT OF REQUEST									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	271,999	0		271,999	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	271,999	0	0	271,999	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				
2. THIS REQUEST CAN BE CATEGORIZED AS:									
<input type="checkbox"/> New Legislation			<input type="checkbox"/> New Program			<input type="checkbox"/> Fund Switch			
<input type="checkbox"/> Federal Mandate			<input type="checkbox"/> Program Expansion			<input checked="" type="checkbox"/> Cost to Continue			
<input type="checkbox"/> GR Pick-Up			<input type="checkbox"/> Space Request			<input type="checkbox"/> Equipment Replacement			
<input type="checkbox"/> Pay Plan			<input type="checkbox"/> Other: _____						

NEW DECISION ITEM

Health and Senior Services		Budget Unit <u>58032C</u>
Division of Community and Public Health		
Vital Records - Expanded Operational Costs	DI# 1580009	HB Section <u>10.775</u>

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

This funding is to assist in offsetting increasing costs related to the issuance of fee-exempt (free) vital records in an effort to stabilize and maintain statewide operations of the vital records and statistics registration and issuance system utilized by the Missouri Department of Health and Senior Services and 115 local public health agencies (LPHAs). Pursuant to 192.060, RSMo, it shall be the duty of the Department of Health and Senior Services to have charge of the state system of registration of births and deaths; to prepare the necessary methods, forms and blanks for obtaining and preserving such records, and to insure the faithful registration of the same in the registration districts and in the central bureau of vital statistics at the capital of the state. Section 193.265, RSMo, relating to the fees collected for the issuance of a vital record, such as birth and death certificates, over the last several years continues to be amended by various entities to expand the list of eligible parties to receive free certificates. Current exempted entities from previous statutory updates include:

- Voter ID: 2016 HB 1631 passed amending Section 115.427, RSMo to require DHSS to provide one (1) fee exempt certified copy of a birth certificate to individuals seeking to obtain a form of personal identification described in §115.427.1, RSMo in order to vote (§115.427.6(2)).
- DSS: 2018 SB 819 passed amending Section 193.265, RSMo to provide free certificates of birth, death, or marriage if the requested by the children's division, the division of youth services, a guardian ad litem, or a juvenile officer on behalf of a child or person under twenty-one years of age in state custody or involved in case.
- Homeless/Unaccompanied Youth: 2020 HB 1414 passed amending Section 193.265, RSMo to provide a free birth certificate to homeless/unaccompanied youth.
- Victims of Domestic Violence/Abuse: 2023 SB 28 passed amending Section 193.265, RSMo to provide a free certificate to a victim of domestic violence or abuse.

While DHSS understands the myriad of legitimate needs and reasons for vital records to be provided to these special groups, the statewide vital records system is supported and operates, in significant part, from the statutory fees collected and deposited in to the Missouri Public Health Services (MOPHS) fund. Fees are also split and deposited into other funds such as the Children's Trust fund and Endowed Care Cemetery fund, among others. Moreover, all local public health agencies keep the vital records fees they collect for the operations of local public health operations and services.

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The amount being requested includes the three year average of the number of certificates issued for free (13,766) average of \$5.00 per certificate from MOPHS and \$4.00 per certificate from GR=\$9.00 total per certificate portion of applicable revenue sources that pertain to DHSS. \$123,894.00.

The passage of 2023 SB 28 is estimated to result in additional requests for free birth certificates. If 25 percent of all persons eligible claim a free birth certificate as estimated in fiscal notes, this would cost the department and additional \$140,183.

The funding is requested for supplies which will be utilized for state printing costs to produce special security paper for issuance of certificates. To account for the Governor Reserve, the amounts requested have been adjusted accordingly.

NEW DECISION ITEM

Health and Senior Services			Budget Unit 58032C						
Division of Community and Public Health									
Vital Records - Expanded Operational Costs			DI# 1580009		HB Section 10.775				
5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.									
	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req
	GR	GR	FED	FED	OTHER	OTHER	TOTAL	TOTAL	One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Supplies (190)	271,999		0		0		271,999		0
Total EE	271,999		0		0		271,999		0
Grand Total	271,999	0.00	0	0.00	0	0.00	271,999	0.00	0
	Gov Rec	Gov Rec	Gov Rec	Gov Rec	Gov Rec	Gov Rec	Gov Rec	Gov Rec	Gov Rec
	GR	GR	FED	FED	OTHER	OTHER	TOTAL	TOTAL	One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Supplies (190)	0		0		0		0		0
Total EE	0		0		0		0		0
Grand Total	0	0.00	0	0.00	0	0.00	0	0.00	0

NEW DECISION ITEM

Health and Senior Services	Budget Unit <u>58032C</u>
Division of Community and Public Health	
Vital Records - Expanded Operational Costs DI# 1580009	HB Section <u>10.775</u>

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

6a. Provide an activity measure(s) for the program.
 Number of birth, death, fetal death/still birth, marriage, and divorce records registered and issued. Number of clients/customers served. Being able to keep pace with increasing programmatic expenses ensures the vital records system can be upgraded which helps ensure vital statewide services remain in operation.

6b. Provide a measure(s) of the program's quality.
 Average queue wait times for incoming phone calls. Average 105,138 calls per annum. Queue wait time base target (1 min 45 sec) and stretch target (1 min 30 sec).

6c. Provide a measure(s) of the program's impact.
 Average cost vs fee collected for a birth or death record. Base target for average cost (\$10) and stretch target for average cost (\$8). Maintaining lower cost aids in sustainability of vital records system which allows for ongoing, critical services and data used to inform a variety of medical and health-related research efforts.

6d. Provide a measure(s) of the program's efficiency.
 Average number of days to respond to a mailed request for a vital records with a base target timeline (10 days) and a stretch target timeline (5 days).

7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:

To achieve some of the target performance measurements, the Bureau of Vital Records needs to redesign and replace the current Missouri Electronic Vital Records (MoEVR) system with a fully electronic vital records system. Recently, to prepare for the procurement of a new, comprehensive vital records system that will incorporate all data from historical vital records systems still being used, the Bureau of Vital Records acquired the project management services of QuantumMark (QM)—the #1 vital records certified management consultant (CMC) firm in the United States. While significant ongoing costs will be associated with this new system, such as annual hosting and maintenance, it will serve as a great strategy to help advance many bureau performance measurements and generate significant cost savings.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
VITAL RECORD CERT AND ISSUANCE								
Vital Records- Expanded Operat - 1580009								
SUPPLIES	0	0.00	0	0.00	271,999	0.00	0	0.00
TOTAL - EE	0	0.00	0	0.00	271,999	0.00	0	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$271,999	0.00	\$0	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$271,999	0.00		0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$0	0.00		0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00		0.00

CORE DECISION ITEM

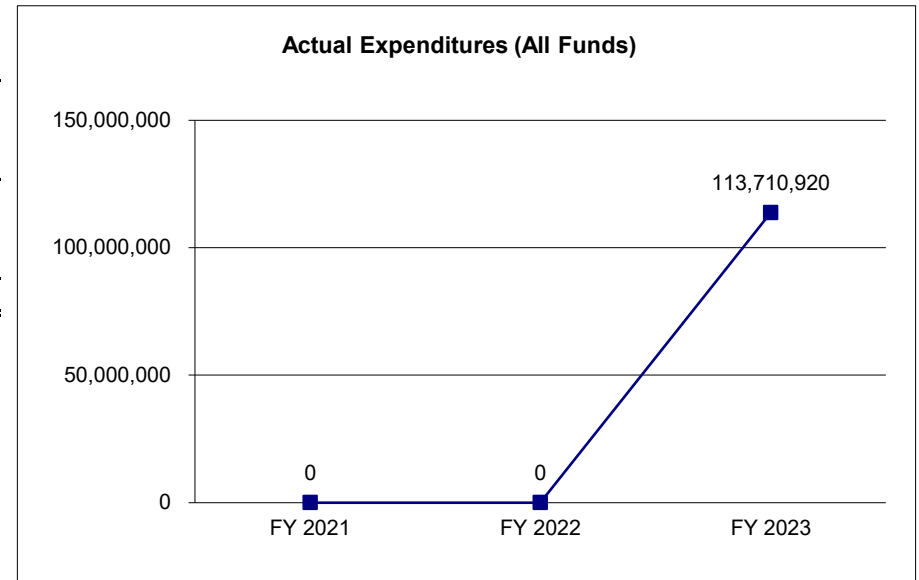
Health and Senior Services					Budget Unit 58034C				
Community and Public Health									
Core - COVID Response and ARPA Initiatives					HB Section 10.780				
1. CORE FINANCIAL SUMMARY									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	14,614,139	0	14,614,139	PS	0	14,446,007	0	14,446,007
EE	0	360,880,884	0	360,880,884	EE	0	360,880,884	0	360,880,884
PSD	0	138,588,123	0	138,588,123	PSD	0	138,588,123	0	138,588,123
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	514,083,146	0	514,083,146	Total	0	513,915,014	0	513,915,014
FTE	0.00	50.00	0.00	50.00	FTE	0.00	50.00	0.00	50.00
Est. Fringe	0	6,197,640	0	6,197,640	Est. Fringe	0	6,134,977	0	6,134,977
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.				
Federal Funds: Department of Health and Senior Services Federal Stimulus (2350) and Department of Health and Senior Services Federal Stimulus - 2021 (2457).									
2. CORE DESCRIPTION									
The Department of Health and Senior Services (DHSS) initiated its response to SARS-CoV-2 (COVID-19) in January 2020. Since the onset of the pandemic, DHSS partnered with other governmental agencies, numerous non-governmental organizations, and healthcare systems, with the Department taking action at multiple levels, from assistance in the field to overall administration, to assist with public health response and mitigation efforts.									
American Rescue Plan Act (ARPA) and Coronavirus State and Local Fiscal Recovery Funds (COVID) funds have strengthened the state's public health infrastructure through enhancements to public health data systems and supporting public health capacity by bolstering the workforce and its foundational capabilities. Missouri's utilization of these federal funds has and will continue to fulfill the purposes of the American Rescue Plan Act, addresses the economic and public health impacts of the pandemic, restores public services, and builds the long-term public health infrastructure necessary to meet future public health crises.									
3. PROGRAM LISTING (list programs included in this core funding)									
Various COVID-19 or ARPA related projects									

CORE DECISION ITEM

Health and Senior Services	Budget Unit 58034C
Community and Public Health	
Core - COVID Response and ARPA Initiatives	HB Section 10.780

4. FINANCIAL HISTORY

	FY 2021 Actual	FY 2022 Actual	FY 2023 Actual	FY 2024 Current Yr.
Appropriation (All Funds)	0	0	895,524,220	717,542,487
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	0	0	895,524,220	717,542,487
Actual Expenditures (All Funds)	0	0	113,710,920	N/A
Unexpended (All Funds)	0	0	781,813,300	N/A
Unexpended, by Fund:				
General Revenue	0	0	0	N/A
Federal	0	0	781,813,300	N/A
Other	0	0	0	N/A



Reverted includes the statutory three percent reserve amount (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Due to the reallocation of DCPH COREs, history of appropriated funds and actual expenditures where they occurred are no longer available. Therefore, FY 2021 and FY 2022 are reflected in the DCPH Admin CORE.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES COVID RESPONSE AND ARPA INIT

5. CORE RECONCILIATION DETAIL

			Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS									
Core Reallocation	1217 5242	PS		0.00	0	1,306,630	0	1,306,630	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5294	PS		5.00	0	551,293	0	551,293	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5265	PS		2.00	0	113,169	0	113,169	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5248	PS		0.00	0	36,543	0	36,543	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5298	PS		0.00	0	400,389	0	400,389	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5284	PS		0.00	0	567,211	0	567,211	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5287	PS		0.00	0	168,132	0	168,132	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5267	PS		0.00	0	98,522	0	98,522	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5263	PS		3.00	0	234,851	0	234,851	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5254	PS		1.00	0	61,373	0	61,373	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5221	PS		38.00	0	9,353,597	0	9,353,597	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5218	PS		1.00	0	1,154,173	0	1,154,173	CORE reallocations for programmatic alignment.
Core Reallocation	1217 5300	PS		0.00	0	151,815	0	151,815	CORE reallocations for programmatic alignment.

CORE RECONCILIATION DETAIL

**DEPARTMENT OF HEALTH & SENIOR SERVICES
COVID RESPONSE AND ARPA INIT**

5. CORE RECONCILIATION DETAIL

			Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS									
Core Reallocation	1217	5276	PS	0.00	0	328,777	0	328,777	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5315	PS	0.00	0	87,664	0	87,664	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5347	EE	0.00	0	999,317	0	999,317	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5306	EE	0.00	0	3,697,407	0	3,697,407	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5264	EE	0.00	0	37,983,085	0	37,983,085	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5295	EE	0.00	0	45,031,588	0	45,031,588	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5286	EE	0.00	0	498,750	0	498,750	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5262	EE	0.00	0	4,634,965	0	4,634,965	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5247	EE	0.00	0	24,313,645	0	24,313,645	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5285	EE	0.00	0	3,685,803	0	3,685,803	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5258	EE	0.00	0	8,480,059	0	8,480,059	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5283	EE	0.00	0	7,502,916	0	7,502,916	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5245	EE	0.00	0	173,483,632	0	173,483,632	CORE reallocations for programmatic alignment.

CORE RECONCILIATION DETAIL

**DEPARTMENT OF HEALTH & SENIOR SERVICES
COVID RESPONSE AND ARPA INIT**

5. CORE RECONCILIATION DETAIL

			Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE ADJUSTMENTS									
Core Reallocation	1217	5271	EE	0.00	0	29,376,176	0	29,376,176	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5219	EE	0.00	0	18,825,128	0	18,825,128	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5266	EE	0.00	0	1,615,681	0	1,615,681	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5354	EE	0.00	0	108,144	0	108,144	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5250	EE	0.00	0	644,588	0	644,588	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5299	PD	0.00	0	3,518,265	0	3,518,265	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5247	PD	0.00	0	24,304,315	0	24,304,315	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5245	PD	0.00	0	96,988,748	0	96,988,748	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5219	PD	0.00	0	13,551,814	0	13,551,814	CORE reallocations for programmatic alignment.
Core Reallocation	1217	5217	PD	0.00	0	224,981	0	224,981	CORE reallocations for programmatic alignment.
NET DEPARTMENT CHANGES				50.00	0	514,083,146	0	514,083,146	
DEPARTMENT CORE REQUEST									
			PS	50.00	0	14,614,139	0	14,614,139	
			EE	0.00	0	360,880,884	0	360,880,884	

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVICES COVID RESPONSE AND ARPA INIT

5. CORE RECONCILIATION DETAIL

		Budget Class	FTE	GR	Federal	Other	Total	Explanation
DEPARTMENT CORE REQUEST								
		PD	0.00	0	138,588,123	0	138,588,123	
		Total	50.00	0	514,083,146	0	514,083,146	
GOVERNOR'S ADDITIONAL CORE ADJUSTMENTS								
Core Reduction	2212 5287	PS	0.00	0	(168,132)	0	(168,132)	Core cutting COVID/ARPA funds previously expended.
NET GOVERNOR CHANGES			0.00	0	(168,132)	0	(168,132)	
GOVERNOR'S RECOMMENDED CORE								
		PS	50.00	0	14,446,007	0	14,446,007	
		EE	0.00	0	360,880,884	0	360,880,884	
		PD	0.00	0	138,588,123	0	138,588,123	
		Total	50.00	0	513,915,014	0	513,915,014	

DECISION ITEM SUMMARY

Budget Unit									
Decision Item	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025	
Budget Object Summary	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC	
Fund	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
COVID RESPONSE AND ARPA INIT									
CORE									
PERSONAL SERVICES									
DHSS FEDERAL STIMULUS	0	0.00	0	0.00	11,814,400	39.00	11,814,400	39.00	
DHSS FEDERAL STIMULUS 2021	0	0.00	0	0.00	2,799,739	11.00	2,631,607	11.00	
TOTAL - PS	0	0.00	0	0.00	14,614,139	50.00	14,446,007	50.00	
EXPENSE & EQUIPMENT									
DHSS FEDERAL STIMULUS	0	0.00	0	0.00	216,622,405	0.00	216,622,405	0.00	
DHSS FEDERAL STIMULUS 2021	0	0.00	0	0.00	144,258,479	0.00	144,258,479	0.00	
TOTAL - EE	0	0.00	0	0.00	360,880,884	0.00	360,880,884	0.00	
PROGRAM-SPECIFIC									
DHSS FEDERAL STIMULUS	0	0.00	0	0.00	135,069,858	0.00	135,069,858	0.00	
DHSS FEDERAL STIMULUS 2021	0	0.00	0	0.00	3,518,265	0.00	3,518,265	0.00	
TOTAL - PD	0	0.00	0	0.00	138,588,123	0.00	138,588,123	0.00	
TOTAL	0	0.00	0	0.00	514,083,146	50.00	513,915,014	50.00	
Pay Plan - 0000012									
PERSONAL SERVICES									
DHSS FEDERAL STIMULUS	0	0.00	0	0.00	0	0.00	41,814	0.00	
DHSS FEDERAL STIMULUS 2021	0	0.00	0	0.00	0	0.00	46,529	0.00	
TOTAL - PS	0	0.00	0	0.00	0	0.00	88,343	0.00	
TOTAL	0	0.00	0	0.00	0	0.00	88,343	0.00	
ARPA Grant Expansion - 1580015									
PERSONAL SERVICES									
DHSS FEDERAL STIMULUS 2021	0	0.00	0	0.00	444,197	0.00	499,197	0.00	
TOTAL - PS	0	0.00	0	0.00	444,197	0.00	499,197	0.00	
EXPENSE & EQUIPMENT									
DHSS FEDERAL STIMULUS 2021	0	0.00	0	0.00	5,034,929	0.00	5,034,929	0.00	
TOTAL - EE	0	0.00	0	0.00	5,034,929	0.00	5,034,929	0.00	
TOTAL	0	0.00	0	0.00	5,479,126	0.00	5,534,126	0.00	
GRAND TOTAL	\$0	0.00	\$0	0.00	\$519,562,272	50.00	\$519,537,483	50.00	

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58032C BUDGET UNIT NAME: COVID Response and ARPA Initiatives HOUSE BILL SECTION: 10.780	DEPARTMENT: Department of Health and Senior Services (DHSS) DIVISION: Division of Community and Public Health (DCPH)
1. Provide the amount by fund of personal service flexibility and the amount by fund of expense and equipment flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed. If flexibility is being requested among divisions, provide the amount by fund of flexibility you are requesting in dollar and percentage terms and explain why the flexibility is needed.	
DEPARTMENT REQUEST	
The Department requests ten percent (10%) flexibility between American Rescue Plan Act of 2021 grant programs in this section.	
2. Estimate how much flexibility will be used for the budget year. How much flexibility was used in the Prior Year Budget and the Current Year Budget? Please specify the amount.	
PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT YEAR ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
\$0	House Bills 10.775 and 10.780 language allows up to ten percent (10%) flexibility between American Rescue Plan Act of 2021 grants within each section.
BUDGET REQUEST ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED	
Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of Governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The Department's requested flex will allow the Department to utilize available resources in the most effective manner as the need arises. Flexibility between House bill sections will allow for transparency. The Department cannot predict how much flexibility will be utilized.	
3. Please explain how flexibility was used in the prior and/or current years.	
PRIOR YEAR EXPLAIN ACTUAL USE	CURRENT YEAR EXPLAIN PLANNED USE
Not applicable.	Not applicable.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
COVID RESPONSE AND ARPA INIT								
CORE								
SALARIES & WAGES	0	0.00	0	0.00	263,795	5.00	263,795	5.00
DESIGNATED PRINCIPAL ASST DEPT	0	0.00	0	0.00	119,884	0.00	119,884	0.00
DIVISION DIRECTOR	0	0.00	0	0.00	642	0.00	642	0.00
DESIGNATED PRINCIPAL ASST DIV	0	0.00	0	0.00	95,656	1.00	95,656	1.00
PROJECT SPECIALIST	0	0.00	0	0.00	170,415	1.02	170,415	1.02
LEGAL COUNSEL	0	0.00	0	0.00	78,956	1.00	78,956	1.00
SPECIAL ASST PROFESSIONAL	0	0.00	0	0.00	220,354	0.38	220,354	0.38
ADMINISTRATIVE SUPPORT CLERK	0	0.00	0	0.00	195,691	1.26	195,691	1.26
ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	6,709	0.01	6,709	0.01
LEAD ADMIN SUPPORT ASSISTANT	0	0.00	0	0.00	50,723	0.32	50,723	0.32
ADMIN SUPPORT PROFESSIONAL	0	0.00	0	0.00	26,430	0.42	26,430	0.42
PROGRAM ASSISTANT	0	0.00	0	0.00	24,993	0.10	24,993	0.10
PROGRAM SPECIALIST	0	0.00	0	0.00	87,983	0.13	87,983	0.13
SENIOR PROGRAM SPECIALIST	0	0.00	0	0.00	77,617	0.10	77,617	0.10
PROGRAM COORDINATOR	0	0.00	0	0.00	83,300	1.00	83,300	1.00
ASSOC RESEARCH/DATA ANALYST	0	0.00	0	0.00	327,202	0.72	327,202	0.72
RESEARCH/DATA ANALYST	0	0.00	0	0.00	480,631	1.57	480,631	1.57
SENIOR RESEARCH/DATA ANALYST	0	0.00	0	0.00	956,697	2.54	956,697	2.54
RESEARCH DATA ANALYSIS SPV/MGR	0	0.00	0	0.00	872,668	2.40	872,668	2.40
PUBLIC RELATIONS COORDINATOR	0	0.00	0	0.00	1,014	0.00	1,014	0.00
NUTRITION SPECIALIST	0	0.00	0	0.00	542	0.00	542	0.00
REGISTERED NURSE	0	0.00	0	0.00	174,120	0.00	174,120	0.00
REGISTERED NURSE SPEC/SPV	0	0.00	0	0.00	271,770	0.23	271,770	0.23
NURSE MANAGER	0	0.00	0	0.00	6,611	0.00	6,611	0.00
CHIEF PHYSICIAN	0	0.00	0	0.00	279,227	0.24	279,227	0.24
SR STAFF DEV TRAINING SPEC	0	0.00	0	0.00	6,483	0.00	6,483	0.00
ENVIRONMENTAL PROGRAM SPEC	0	0.00	0	0.00	77,123	0.19	77,123	0.19
ENVIRONMENTAL PROGRAM SPV	0	0.00	0	0.00	1,542	0.00	1,542	0.00
ENVIRONMENTAL PROGRAM MANAGER	0	0.00	0	0.00	190,303	0.30	190,303	0.30
ACCOUNTS ASSISTANT	0	0.00	0	0.00	53,901	1.42	53,901	1.42
ACCOUNTANT	0	0.00	0	0.00	12,615	0.00	12,615	0.00
INTERMEDIATE ACCOUNTANT	0	0.00	0	0.00	65,220	1.00	65,220	1.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
COVID RESPONSE AND ARPA INIT								
CORE								
ACCOUNTANT SUPERVISOR	0	0.00	0	0.00	1,142	0.00	1,142	0.00
GRANTS SPECIALIST	0	0.00	0	0.00	63,046	0.42	63,046	0.42
GRANTS SUPERVISOR	0	0.00	0	0.00	58,364	0.88	58,364	0.88
PROCUREMENT ANALYST	0	0.00	0	0.00	46,994	1.00	46,994	1.00
ASSOC APPLICATIONS DEVELOPER	0	0.00	0	0.00	56,969	0.00	56,969	0.00
APPLICATIONS DEVELOPER	0	0.00	0	0.00	386	0.00	386	0.00
SENIOR APPLICATIONS DEVELOPER	0	0.00	0	0.00	242	0.00	242	0.00
DIR STRATEGY & PLANNING LVL 3	0	0.00	0	0.00	3,469	0.00	3,469	0.00
PROJECT MANAGER	0	0.00	0	0.00	1,151	0.00	1,151	0.00
ASSOCIATE EPIDEMIOLOGIST	0	0.00	0	0.00	153,598	0.13	153,598	0.13
EPIDEMIOLOGIST	0	0.00	0	0.00	1,112,890	2.32	1,112,890	2.32
SENIOR EPIDEMIOLOGIST	0	0.00	0	0.00	502,179	0.97	502,179	0.97
PUBLIC HEALTH ENV OFFICER	0	0.00	0	0.00	869,675	2.17	869,675	2.17
LABORATORY SUPPORT ASSISTANT	0	0.00	0	0.00	108,273	3.00	108,273	3.00
LABORATORY SCIENTIST	0	0.00	0	0.00	100,288	1.99	100,288	1.99
SENIOR LABORATORY SCIENTIST	0	0.00	0	0.00	102,564	1.93	102,564	1.93
LABORATORY SUPERVISOR	0	0.00	0	0.00	149,406	2.24	149,406	2.24
LABORATORY MANAGER	0	0.00	0	0.00	81,848	1.17	81,848	1.17
PUBLIC HEALTH PROGRAM ASSOC	0	0.00	0	0.00	463,805	1.19	463,805	1.19
PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	1,089,056	6.88	1,089,056	6.88
SR PUBLIC HEALTH PROGRAM SPEC	0	0.00	0	0.00	261,480	0.43	261,480	0.43
PUBLIC HEALTH PROGRAM SPV	0	0.00	0	0.00	738,986	0.71	738,986	0.71
PUBLIC HEALTH PROGRAM MANAGER	0	0.00	0	0.00	641,656	0.22	641,656	0.22
OTHER	0	0.00	0	0.00	2,725,855	0.00	2,557,723	0.00
TOTAL - PS	0	0.00	0	0.00	14,614,139	50.00	14,446,007	50.00
TRAVEL, IN-STATE	0	0.00	0	0.00	70,747	0.00	70,747	0.00
TRAVEL, OUT-OF-STATE	0	0.00	0	0.00	126,847	0.00	126,847	0.00
SUPPLIES	0	0.00	0	0.00	37,086,404	0.00	37,086,404	0.00
PROFESSIONAL DEVELOPMENT	0	0.00	0	0.00	40,000	0.00	40,000	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	153,010	0.00	153,010	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	294,833,517	0.00	294,833,517	0.00
M&R SERVICES	0	0.00	0	0.00	4,565,918	0.00	4,565,918	0.00

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
COVID RESPONSE AND ARPA INIT								
CORE								
COMPUTER EQUIPMENT	0	0.00	0	0.00	15,764,930	0.00	15,764,930	0.00
MOTORIZED EQUIPMENT	0	0.00	0	0.00	9,271	0.00	9,271	0.00
OFFICE EQUIPMENT	0	0.00	0	0.00	51,038	0.00	51,038	0.00
OTHER EQUIPMENT	0	0.00	0	0.00	6,985,360	0.00	6,985,360	0.00
PROPERTY & IMPROVEMENTS	0	0.00	0	0.00	250,000	0.00	250,000	0.00
MISCELLANEOUS EXPENSES	0	0.00	0	0.00	943,842	0.00	943,842	0.00
TOTAL - EE	0	0.00	0	0.00	360,880,884	0.00	360,880,884	0.00
PROGRAM DISTRIBUTIONS	0	0.00	0	0.00	138,588,123	0.00	138,588,123	0.00
TOTAL - PD	0	0.00	0	0.00	138,588,123	0.00	138,588,123	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$514,083,146	50.00	\$513,915,014	50.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$514,083,146	50.00	\$513,915,014	50.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

PROGRAM DESCRIPTION

Health and Senior Services	HB Section: <u>10.780</u>
COVID Response and ARPA Initiatives	
Program is found in the following core budget(s): COVID Response and ARPA Initiatives	
1a. What strategic priority does this program address?	
Build and Strengthen Partnerships, Use Clear and Consistent Communication to Build Trust, Expand Access to Services, Invest in Innovation to Modernize Infrastructure, and Re-envision and Strengthen the Workforce	
1b. What does this program do?	
<p>The Department of Health and Senior Services (DHSS) initiated its response to SARS-CoV-2 (COVID-19) in January 2020. Since the onset of the pandemic, DHSS partnered with other governmental agencies, numerous non-governmental organizations, and healthcare systems, with the Department taking action at multiple levels, from assistance in the field to overall administration, to assist with public health response and mitigation efforts.</p> <p>American Rescue Plan Act (ARPA) and Coronavirus State and Local Fiscal Recovery Funds (COVID) funds have strengthened the state's public health infrastructure through enhancements to public health data systems and supporting public health capacity by bolstering the workforce and its foundational capabilities. Missouri's utilization of these federal funds has and will continue to fulfill the purposes of the American Rescue Plan Act, addresses the economic and public health impacts of the pandemic, restores public services, and builds the long-term public health infrastructure necessary to meet future public health crises.</p> <ul style="list-style-type: none">• Data: Maintains the data associated with COVID-19 to maintain accurate counting and reporting of all COVID-19 measures. This data drives the work of epidemiologists throughout the state.• Sewershed: Monitors the amount of viral genetic materials in wastewater in approximately 100 community wastewater systems in Missouri to provide an early indicator of new or worsening outbreaks, as well as the presence and distribution of variants and sub-lineages across the state. Also monitors state owned facilities (Departments of Corrections and Mental Health as well as veterans homes) and six universities.• Vaccines: Enrolls COVID-19 providers, processes COVID-19 vaccine orders, tracks doses administered by provider, processes COVID-19 vaccine redistribution among providers, and ensures quality assurance through COVID-19 provider site visits.• Community Testing: Provides free COVID-19 testing events for the public throughout the state.• Antigen Testing: Provides antigen testing to schools, long term care facilities, residential treatment centers, shelters, Area Agencies on Aging, and many others that care for the vulnerable Missourians.• Provides consultation, healthcare staffing, ventilators, and alternative care site assistance to hospitals and health care providers throughout the state as needed.• Personal Protective Equipment Coordination: PPE was procured at the state level in order to ensure all areas had an adequate supply: state-run facilities, local public health agencies, schools, first responders, local businesses, and healthcare providers unable to procure PPE due to supply chain disruption.	

PROGRAM DESCRIPTION

Health and Senior Services

COVID Response and ARPA Initiatives

Program is found in the following core budget(s): COVID Response and ARPA Initiatives

HB Section: 10.780

2a. Provide an activity measure(s) for the program.

Activity	FY 2023	FY 2024 (Proj.)	FY 2025 (Proj.)
Healthcare acquired infection consultations for Multi-Drug Resistant Organism (MDRO) consultations, Infection Control Assessments Response (ICAR) visits, and colonization screenings.	322 MDRO consultations in over 116 facilities; 270 onsite assessments; 19 colonization screenings including 936 samples.	MDRO consultations and colonization screenings will increase with a goal of reaching 45 percent of long-term care facilities.	MDRO consultations and colonization screenings will increase with a goal of reaching 45 percent of long-term care facilities.
Infection control educational offerings.	2 workshops; 4 webinars through contract; approx. 780 attendees.	2 workshops; 6 webinars through contract; over 10 educational presentations.	1 workshop; 4 webinars through contract; over 10 educational presentations.
Local Public Health Agencies receiving financial support to respond to pandemic and prepare for future public health emergencies.	113	113	103
Schools receiving HVAC and HEPA filter equipment and supplies.	920	500	0*
Impressions resulting from out-of-home COVID-19 safe travel public awareness campaign.	40,617,647	17,584,167	0*
Confinement facilities receiving support to detect and mitigate COVID-19.	20	Up to 227	Up to 227
Public Health Workforce Preparedness (PHWP) certifications obtained and MPH's enrolled.	124 enrolled in PHWP certificates and 41 enrolled in MPH.	38 PHWP Certificates.	0*
Hospitals receiving financial support for responding to COVID-19.	30	9	0*

*Contract Funding is anticipated to end.

*Contract Funding is anticipated to end.

PROGRAM DESCRIPTION

Health and Senior Services

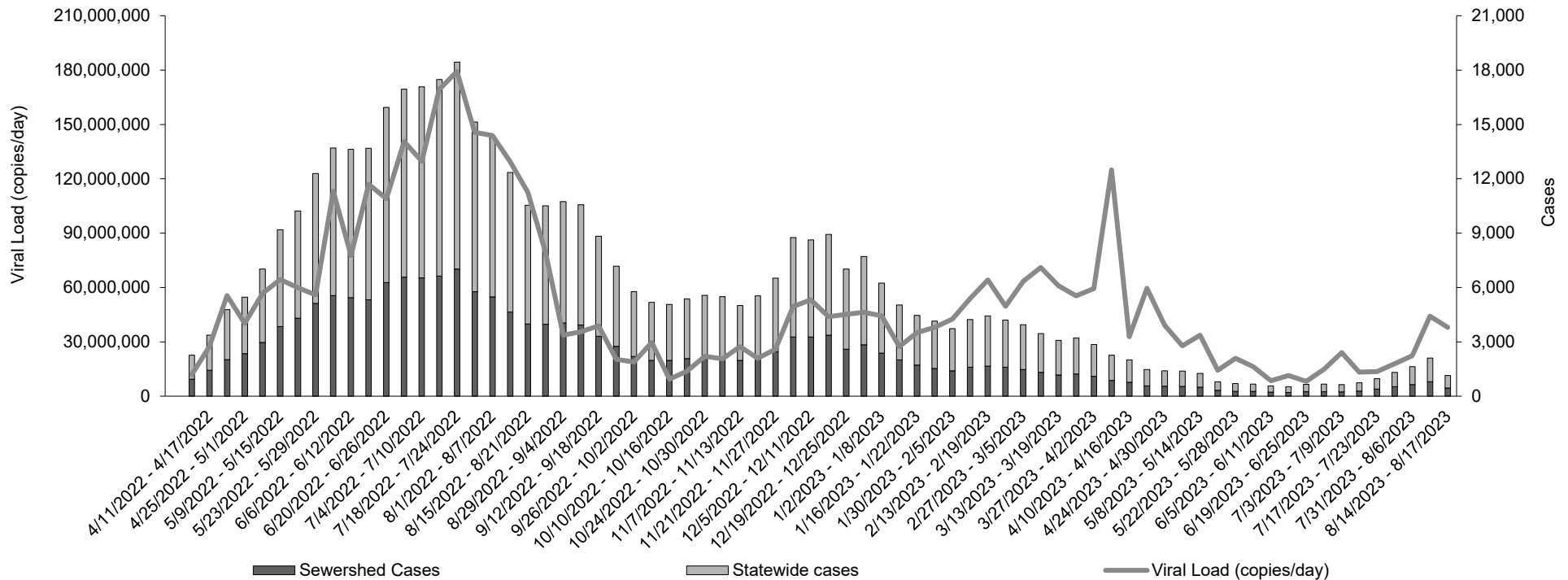
HB Section: 10.780

COVID Response and ARPA Initiatives

Program is found in the following core budget(s): COVID Response and ARPA Initiatives

2b. Provide a measure(s) of the program's quality.

Statewide Viral Load in Wastewater and Cases over Time



The genetic material from novel coronavirus can be present in human waste even when individuals have no symptoms. Tracking the amount of viral genetic material (viral load) in wastewater can help monitor trends and provide early awareness of new or worsening outbreaks. Sewershed surveillance cannot tell us the number of individuals currently infected, but as data are collected and trends are identified, that information may be helpful to track the progression of the virus in communities and inform public health strategy. "Sewershed cases" is the measurement of the number of positive cases within the geographic boundaries of sewershed testing.

PROGRAM DESCRIPTION

Health and Senior Services	HB Section: <u>10.780</u>		
COVID Response and ARPA Initiatives			
Program is found in the following core budget(s): COVID Response and ARPA Initiatives			
2c. Provide a measure(s) of the program's impact. <p>The COVID and ARPA funding has allowed the state of Missouri to respond to the pandemic and to also boost infrastructure (human capital, technology, equipment, etc.) such that resilience to emerging threats is increased and any future response needed is more prepared. The stories of how the funding has impacted lives throughout Missouri is showcased at https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/funding.php. This site, providing transparency and a reflection on the impact of this funding, has been recognized as a best practice by the Centers for Disease Control and Prevention (CDC) and the Association of State and Territorial Health Officials (ASTHO).</p>			
A Few Quotes/Statements from Beneficiaries on Impact Funding has had on Community (stakeholder) Served			
<p>"I was a bit hesitant to work with the ICAR program as I was afraid it was simply an additional measure of oversight by the state. After working with the ICAR team, I can honestly say that my fears were completely unfounded. The meeting was quick and painless and they helped us to identify additional ways to keep our residents and staff safe. Despite my initial hesitation, I would wholeheartedly recommend this process to any long-term care facility in the state." - Facility that received an ICAR assessment</p>	<p>Funding was utilized to create an Outbreak Response Center (ORC) for a county health center. The ORC is a multipurpose room to be used as an emergency operations center that will also accommodate mass testing and vaccination with a separate entrance, bathroom, and HVAC system with HEPA filtration and UV lights to reduce the risk of airborne transmission for diseases like COVID-19. This investment also provides more space for professional development and overall enhances planning and response in order to improve efforts to respond to future outbreaks or pandemic response. - A Local Public Health Agency</p>		
<p>"We want to empower the Missouri public health workforce with a graduate-level education and contribute to strengthening Missouri's overall health outcomes." - Marisa Hastie, EdD Dean and Associate Professor at A.T. Still University</p>	<p>"Thank you very much for your help with this wonderful program. It's been a huge blessing that we were able to have much needed work done on our ducts and have our HVAC units examined" - One school district participating in the HVAC cleaning and assessment project</p>		
2d. Provide a measure(s) of the program's efficiency.			
Expected Return on Investment for Technology Replacement of Vital Records System			
	FY 2025 Proj.	FY 2026 Proj.	FY 2027 Proj.
Estimated Cost Savings	\$276,263	\$1,105,053	\$1,105,053
<p>A considerable amount of staff time is expended on troubleshooting errors and attempting to provide temporary alternative workarounds in order to continue to conduct critical business with an outdated vital records system. With one, effective, comprehensive system staff time spent on conducting routine business will be reduced. In total, this project is estimated to generate \$1,505,053 in cost savings annually, resulting in a five-year return on investment of \$5,525,266.50. The Bureau of Vital Records system update is scheduled to be completed in Fiscal Year 2025. The full amount of estimated cost-savings will not be realized until Fiscal Year 2026.</p>			

PROGRAM DESCRIPTION

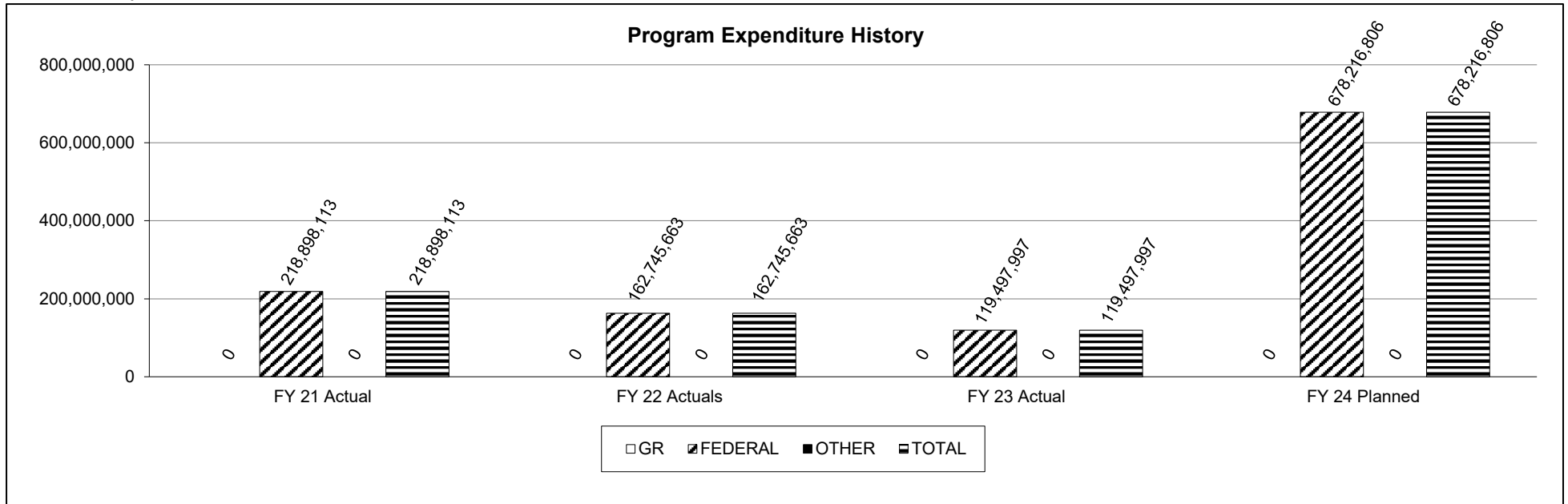
Health and Senior Services

HB Section: 10.780

COVID Response and ARPA Initiatives

Program is found in the following core budget(s): COVID Response and ARPA Initiatives

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); Coronavirus Preparedness and Response Act (P.L. 116-123); COVID-19 Paycheck Protection Program and Health Care Enhancement Act Response Activities (P.L. 116-139); Consolidated Appropriations Act, 2021, Coronavirus Response and Relief Supplemental Appropriations Act, Public Law 116-260; American Rescue Plan Act (HR 1319), Public Law 117-2.

6. Are there federal matching requirements? If yes, please explain.

Not applicable.

7. Is this a federally mandated program? If yes, please explain.

Not applicable.

NEW DECISION ITEM

Department of Health and Senior Services					Budget Unit 58034C				
Division of Community and Public Health									
ARPA Grant Expansion				DI# 1580015	HB Section 10.780				
1. AMOUNT OF REQUEST									
FY 2025 Budget Request					FY 2025 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	444,198	0	444,198	PS	0	499,197	0	499,197
EE	0	4,943,399	0	4,943,399	EE	0	5,034,929	0	5,034,929
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	5,387,597	0	5,387,597	Total	0	5,534,126	0	5,534,126
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	165,553	0	165,553	Est. Fringe	0	186,051	0	186,051
<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>					<i>Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.</i>				
Federal Funds: Department of Health and Senior Services Federal Stimulus - 2021 Fund (2457).									
2. THIS REQUEST CAN BE CATEGORIZED AS:									
New Legislation		New Program		Fund Switch					
Federal Mandate		X	Program Expansion		Cost to Continue				
GR Pick-Up		Space Request		Equipment Replacement					
Pay Plan		Other: _____							

NEW DECISION ITEM

Department of Health and Senior Services Division of Community and Public Health ARPA Grant Expansion	Budget Unit <u>58034C</u> HB Section <u>10.780</u>
DI# 1580015	

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

Some federal COVID-19 related grant funds changed from being funded through COVID grants to being funded through American Rescue Plan Act (ARPA) federal dollars. The department requests additional federal ARPA appropriations to utilize these funds. These funds pertain our National Wastewater Surveillance Systems Grant that is designed to coordinate and build the nation's capacity to track the presence of SARS-CoV-2, the virus that causes COVID-19, in wastewater samples collected across the country as well as our Data Modernization 2 Grant, Data Modernization Electronic Case Reporting (ECR) Grant, and our Data Modernization Health Information Systems (HIS) Grants that are designed to create comprehensive strategy designed to move public health from tracking threats to predicting them.

In addition, our recently received Public Health Infrastructure Grant has received additional funding to allow our state to further expand and improve the public health's infrastructure. This expansion is occurring through funding provided through American Rescue Plan Act (ARPA) federal dollars. The Department is requesting additional federal ARPA appropriations to utilize these funds. These funds pertain to data modernization efforts to help prevent and detect the spread of infectious diseases among vulnerable communities.

Without these appropriations the funds cannot be used in FY 2025 and pertinent grant activities will cease.

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The department requests ARPA appropriations for three purposes:

- \$2,441,333 for the National Wastewater Surveillance Systems Grant that is designed to coordinate and build the nation's capacity to track the presence of SARS-CoV-2, the virus that causes COVID-19, in wastewater samples collected across the country.
- \$2,442,173 for Data Modernization 2 Grant, Data Modernization Electronic Case Reporting (ECR) Grant, and our Data Modernization Health Information Systems (HIS) Grant that are designed to create comprehensive strategy designed to move public health from tracking threats to predicting them.
- \$444,198 to allow additional staff time for the Public Health Infrastructure Grant to fund expand and improve the public health's infrastructure. Current appropriation levels do not exist to fund expanded authority needed to cover anticipated staffing needs to implement the funding received in the expansion of the Public Health Infrastructure Grant.

NEW DECISION ITEM

Department of Health and Senior Services			Budget Unit		58034C				
Division of Community and Public Health									
ARPA Grant Expansion		DI# 1580015	HB Section		10.780				
5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.									
	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req
	GR	GR	FED	FED	OTHER	OTHER	TOTAL	TOTAL	One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Application Developer (14AS20)	0	0.00	1,414	0.00	0	0.00	1,414	0.00	0
Application Development Spec (14AS40)	0	0.00	1,732	0.00	0	0.00	1,732	0.00	0
Associate Research/Data Analyst (02RD20)	0	0.00	72,910	0.00	0	0.00	72,910	0.00	0
Data Manager (14DM50)	0	0.00	4,550	0.00	0	0.00	4,550	0.00	0
Enterprise Architect (14EA10)	0	0.00	2,583	0.00	0	0.00	2,583	0.00	0
Epidemiologist (19ED20)	0	0.00	9,721	0.00	0	0.00	9,721	0.00	0
Public Health Program Manager (19PH50)	0	0.00	11,398	0.00	0	0.00	11,398	0.00	0
Public Health Program Supr (19PH40)	0	0.00	16,141	0.00	0	0.00	16,141	0.00	0
Quality Control Spec (14QC20)	0	0.00	2,029	0.00	0	0.00	2,029	0.00	0
Research and Data Analysis Supr (02RD50)	0	0.00	58,225	0.00	0	0.00	58,225	0.00	0
Research/Data Analyst (02RD30)	0	0.00	56,793	0.00	0	0.00	56,793	0.00	0
Research/Data Assistant (02RD10)	0	0.00	15,282	0.00	0	0.00	15,282	0.00	0
Senior Applications Developer (14AS30)	0	0.00	752	0.00	0	0.00	752	0.00	0
Senior Epidemiologist (19ED30)	0	0.00	34,686	0.00	0	0.00	34,686	0.00	0
Senior Research/Data Analyst (02RD40)	0	0.00	45,365	0.00	0	0.00	45,365	0.00	0
Special Asst Professional (009871)	0	0.00	108,700	0.00	0	0.00	108,700	0.00	0
Systems Administration Spec (14SA20)	0	0.00	1,916	0.00	0	0.00	1,916	0.00	0
Total PS	0	0.00	444,198	0.00	0	0.00	444,198	0.00	0
Travel, In-state (140)	0		11,357		0		11,357		0
Supplies (190)	0		32,253		0		32,253		0
Communication Serv and Supp (340)	0		53,452		0		53,452		0
Professional Services (400)	0		4,834,526		0		4,834,526		0
M&R Services (430)	0		11,811		0		11,811		0
Total EE	0		4,943,399		0		4,943,399		0
Grand Total	0	0.00	5,387,597	0.00	0	0.00	5,387,597	0.00	0

NEW DECISION ITEM

Department of Health and Senior Services			Budget Unit 58034C						
Division of Community and Public Health			HB Section 10.780						
ARPA Grant Expansion			DI# 1580015						
Budget Object Class/Job Class	Gov Rec GR DOLLARS	Gov Rec GR FTE	Gov Rec FED DOLLARS	Gov Rec FED FTE	Gov Rec OTHER DOLLARS	Gov Rec OTHER FTE	Gov Rec TOTAL DOLLARS	Gov Rec TOTAL FTE	Gov Rec One-Time DOLLARS
Application Developer (14AS20)	0	0.00	3,330	0.00	0	0.00	3,330	0.00	0
Application Development Spec (14AS40)	0	0.00	1,732	0.00	0	0.00	1,732	0.00	0
Associate Research/Data Analyst (02RD20)	0	0.00	72,910	0.00	0	0.00	72,910	0.00	0
Data Manager (14DM50)	0	0.00	4,550	0.00	0	0.00	4,550	0.00	0
Enterprise Architect (14EA10)	0	0.00	2,583	0.00	0	0.00	2,583	0.00	0
Epidemiologist (19ED20)	0	0.00	9,721	0.00	0	0.00	9,721	0.00	0
Public Health Program Manager (19PH50)	0	0.00	66,398	0.00	0	0.00	66,398	0.00	0
Public Health Program Supr (19PH40)	0	0.00	16,141	0.00	0	0.00	16,141	0.00	0
Quality Control Spec (14QC20)	0	0.00	2,029	0.00	0	0.00	2,029	0.00	0
Research and Data Analysis Supr (02RD50)	0	0.00	58,225	0.00	0	0.00	58,225	0.00	0
Research/Data Analyst (02RD30)	0	0.00	56,793	0.00	0	0.00	56,793	0.00	0
Research/Data Assistant (02RD10)	0	0.00	15,282	0.00	0	0.00	15,282	0.00	0
Senior Applications Developer (14AS30)	0	0.00	752	0.00	0	0.00	752	0.00	0
Senior Epidemiologist (19ED30)	0	0.00	34,686	0.00	0	0.00	34,686	0.00	0
Senior Research/Data Analyst (02RD40)	0	0.00	45,365	0.00	0	0.00	45,365	0.00	0
Special Asst Professional (009871)	0	0.00	108,700	0.00	0	0.00	108,700	0.00	0
Systems Administration Spec (14SA20)	0	0.00	0	0.00	0	0.00	0	0.00	0
Total PS	0	0.00	499,197	0.00	0	0.00	499,197	0.00	0
Travel, In-state (140)	0		11,357		0		11,357		0
Supplies (190)	0		32,253		0		32,253		0
Communication Serv and Supp (340)	0		53,452		0		53,452		0
Professional Services (400)	0		4,926,056		0		4,926,056		0
M&R Services (430)	0		11,811		0		11,811		0
Total EE	0		5,034,929		0		5,034,929		0
Grand Total	0	0.00	5,534,126	0.00	0	0.00	5,534,126	0.00	0

NEW DECISION ITEM

Department of Health and Senior Services	Budget Unit <u>58034C</u>
Division of Community and Public Health	
ARPA Grant Expansion DI# 1580015	HB Section <u>10.780</u>

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

6a. Provide an activity measure(s) for the program.
The activity measure for this program will be the number of tests conducted in the prior year and the percent of nationally notifiable conditions sent electronically to CDC using the preferred, standardized Message Mapping Guides (MMGs).

6b. Provide a measure(s) of the program's quality.
The program's quality will be measured by the change in virus levels and the percent of employees who report having the appropriate training and workforce development in health informatics for their positions.

6c. Provide a measure(s) of the program's impact.
A measure of the program's impact is the change in virus levels and percent of laboratories utilizing Electronic Laboratory Reporting (ELR) to send data to the Department.

6d. Provide a measure(s) of the program's efficiency.
The program's efficiency will be measured by the number of tests conducted in the past five years and percent of laboratory results entered electronically into disease surveillance system without manual intervention.

7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:
The Department will continue to monitor COVID data, sewer shed output, vaccines, community testing, and other aspect of the public health impacts of the pandemic and associated funding to measure the response and enhancements to ensure systems are in place necessary to meet future public health crises.

DECISION ITEM DETAIL

Budget Unit	FY 2023	FY 2023	FY 2024	FY 2024	FY 2025	FY 2025	FY 2025	FY 2025
Decision Item	ACTUAL	ACTUAL	BUDGET	BUDGET	DEPT REQ	DEPT REQ	GOV REC	GOV REC
Budget Object Class	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
COVID RESPONSE AND ARPA INIT								
ARPA Grant Expansion - 1580015								
SPECIAL ASST PROFESSIONAL	0	0.00	0	0.00	108,700	0.00	108,700	0.00
RESEARCH/DATA ASSISTANT	0	0.00	0	0.00	15,282	0.00	15,282	0.00
ASSOC RESEARCH/DATA ANALYST	0	0.00	0	0.00	72,910	0.00	72,910	0.00
RESEARCH/DATA ANALYST	0	0.00	0	0.00	56,793	0.00	56,793	0.00
SENIOR RESEARCH/DATA ANALYST	0	0.00	0	0.00	45,365	0.00	45,365	0.00
RESEARCH DATA ANALYSIS SPV/MGR	0	0.00	0	0.00	58,225	0.00	58,225	0.00
APPLICATIONS DEVELOPER	0	0.00	0	0.00	3,330	0.00	3,330	0.00
SENIOR APPLICATIONS DEVELOPER	0	0.00	0	0.00	752	0.00	752	0.00
APPLICATIONS DEVELOPMENT SPEC	0	0.00	0	0.00	1,732	0.00	1,732	0.00
DATA MANAGER	0	0.00	0	0.00	4,550	0.00	4,550	0.00
ENTERPRISE ARCHITECT	0	0.00	0	0.00	2,583	0.00	2,583	0.00
QUALITY CONTROL SPECIALIST	0	0.00	0	0.00	2,029	0.00	2,029	0.00
EPIDEMIOLOGIST	0	0.00	0	0.00	9,721	0.00	9,721	0.00
SENIOR EPIDEMIOLOGIST	0	0.00	0	0.00	34,686	0.00	34,686	0.00
PUBLIC HEALTH PROGRAM SPV	0	0.00	0	0.00	16,141	0.00	16,141	0.00
PUBLIC HEALTH PROGRAM MANAGER	0	0.00	0	0.00	11,398	0.00	66,398	0.00
TOTAL - PS	0	0.00	0	0.00	444,197	0.00	499,197	0.00
TRAVEL, IN-STATE	0	0.00	0	0.00	11,357	0.00	11,357	0.00
SUPPLIES	0	0.00	0	0.00	32,253	0.00	32,253	0.00
COMMUNICATION SERV & SUPP	0	0.00	0	0.00	53,452	0.00	53,452	0.00
PROFESSIONAL SERVICES	0	0.00	0	0.00	4,926,056	0.00	4,926,056	0.00
M&R SERVICES	0	0.00	0	0.00	11,811	0.00	11,811	0.00
TOTAL - EE	0	0.00	0	0.00	5,034,929	0.00	5,034,929	0.00
GRAND TOTAL	\$0	0.00	\$0	0.00	\$5,479,126	0.00	\$5,534,126	0.00
GENERAL REVENUE	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
FEDERAL FUNDS	\$0	0.00	\$0	0.00	\$5,479,126	0.00	\$5,534,126	0.00
OTHER FUNDS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

